

COUNTY COUNCIL OF DURHAM



ANNUAL REPORT of the
COUNTY MEDICAL OFFICER OF HEALTH
CHIEF WELFARE OFFICER AND
PRINCIPAL SCHOOL MEDICAL OFFICER

STANLEY LUDKIN, M.D., B.S., D.P.H.

for the YEAR 1967

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Health and Welfare Department,
County Hall,
Durham.

July, 1968.

Madam Chairman, Ladies and Gentlemen,

I have the honour to present the combined Health, Welfare and School Health Service Report for the Administrative County for the year 1967. The reports are combined in this manner in order to give a more comprehensive picture of the work carried out without separating arbitrarily the work and responsibilities of members of the staff engaged on mixed duties.

Comments on the various services have been made under each section and, as far as possible, statistical data has been eliminated from the text of the report, being provided in detail in a separate section. While details of the health and welfare services in the "Excepted" districts of Easington and Stockton are included in Part I of my report, reports on the school health service in these latter districts are separate in Parts IV and V.

As a result of the transfer on 1st April, 1967, of part of the Administrative County under the Hartlepool Order, 1966, the Darlington Order, 1967, and the Sunderland Order, 1967, the estimate of population for mid-1967 shows a reduction of 44,540 when compared with mid-1966, the area of the Administrative County being reduced by 10,084 acres. Rates shown in this report are, of course, comparable with those shown in previous years but other figures need to be adjusted to allow for the reduction of 4.6% in the population. The statistics in the report refer, as far as possible, only to the administrative area as constituted at the end of the year.

The health in the County continued to be satisfactory and it is pleasing to report new low record rates for stillbirths and perinatal deaths of infants. Unfortunately the death rate for cancer of the lung continues to rise. One clinically confirmed case of poliomyelitis was notified during the year, the person concerned not having been immunised.

The planned development of services with the provision of additional field staff and also, where appropriate, premises, has continued particularly in the fields of mental health, welfare for aged and handicapped persons and health education. However, with every development more needs became exposed and even greater became the demands on the services. Available money and staff are now the limiting factors. The most acute shortages exist among doctors, dentists and health visitors but despite these difficulties every effort has been made to improve liaison with the General Practitioner Medical Service and towards this aim, and with the co-operation of more and more general practitioners, extensive plans for the building of health centres have been embarked upon.

So far as internal organisation is concerned, during the year the Department worked in close liaison with the County Council's Management Services Unit who, at my request, have carried out investigations into the work of the school health, ambulance, domestic help, immunisation and vaccination and health visiting services as well as into certain aspects of the delegated health and welfare functions of the Easington Rural District Council. Further studies of the overall organisation of the Department are contemplated in the future because of the introduction of so many new services and the development in existing services to meet increasing demands or needs.

I wish to thank members of my staff for their continued assistance and co-operation throughout the year. Because of developing services, many additional demands have been made on them and many changes and adjustments have been made, but I am most grateful for the way they have responded.

Finally, to the Chairmen, Vice-Chairmen and members of the Health and Education Committees and Sub-Committees, I must express my appreciation of the support and help given so readily and consistently throughout the year.

Your obedient servant,

STANLEY LUDKIN,
County Medical Officer.

STAFF OF THE COUNTY HEALTH DEPARTMENT

COUNTY MEDICAL OFFICER OF HEALTH
Stanley Ludkin, M.D., B.S., D.P.H.

DEPUTY COUNTY MEDICAL OFFICER OF HEALTH
R. G. Hendry, M.B., Ch.B., (D.P.H.,) D.Obst., R.C.O.G.

PRINCIPAL SENIOR MEDICAL OFFICERS

Administration—A. D. Bostock, M.B., Ch.B., D.P.H.

Child Health—N. V. Crowley, M.B., B.Ch., B.A.O., D.C.H., D.P.H., L.M. (from 1.7.67)

Geriatrics—M. A. Loraine, B.Sc., M.B., Ch.B., D.C.H., D.P.H.

SENIOR MEDICAL OFFICERS

Maternity and Child Welfare—E. M. Osborne, M.B., Ch.B., D.P.H., D.C.H., D.Obst., R.C.O.G.

Schools—W. E. Rigby, M.B., Ch.B.

CLINICAL MEDICAL OFFICERS

K. W. Balut, M.B., Ch.B.

L. R. Benham, M.B., B.S., D.P.H. (part-time)
R. C. Carr, M.B., B.S.

W. J. Coates, M.B., Ch.B., D.Obst., R.C.O.G. (part-time)
M. M. Copeland, M.B., Ch.B.
M. T. Cunningham, M.B., B.S.

J. Dabrowska, M.B., Ch.B. (part-time)
M. M. Dickinson, M.R.C.S., L.R.C.P.
A. J. Edwards, M.B., Ch.B.

J. T. Eustace, M.D., B.Ch., B.A.O., M.R.C.P.I. (until 12.9.67)
V. H. Feltoe, M.B., B.S. (part-time, from 27.11.67)

D. D. Field, M.B., Ch.B., M.R.C.S., L.R.C.P. (until 31.8.67)
K. Gill, M.B., B.S., D.R.C.O.G.

E. S. Gillespie, M.B., Ch.B. (part-time)

J. M. Hegarty, M.B., B.Ch., B.A.O., D.P.H. (part-time)
J. W. Howe, M.B., B.S. (part-time from 1.11.67)

W. E. Hutchinson, M.D., B.Ch., D.P.H. (temporary)
G. A. Macgregor, M.D., D.P.H. (part-time)

A. R. McNaughton, M.B., Ch.B.

D. D. Nichol, M.B., B.S., B.Hy., D.P.H.

R. A. O. G. Pearson, M.B., B.S., D.T.M & H., R.C.O.G. (from 1.12.67)
D. P. Pick, M.B., Ch.B.

M. W. Rodgers, M.B., B.Ch., B.A.O., D.P.H. (part-time)
L. Ross, M.B., B.S.

W. H. Skinner, L.R.C.P., L.R.C.S., L.R.F.P.S.

K. M. Slawinska, M.B., Ch.B. (part-time, from 22.5.67)
L. Smith, M.B., B.S., D.R.C.O.G.

K. M. Stevens, M.B., B.S.

H. W. Tonge, M.B., Ch.B. (part-time)

N. S. Wager, M.R.C.S., L.R.C.P. (part-time)
A. Waggg, M.B., B.S.

W. Welsh, L.R.C.P., L.R.C.S., L.R.F.P.S.

A. S. M. Wilson, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H. (part-time)
M. A. Wynne, M.B., B.S.

ASSISTANT COUNTY MEDICAL OFFICERS

- | | |
|--------------|--|
| Area No. 1. | J. A. Dryden, M.A., B.Sc., M.B., B.Chir., D.P.H., D.I.H. |
| Area No. 2. | H. C. Weir, M.A., M.B., B.Ch., B.A.O., D.P.H. |
| Area No. 3. | R. Hill, M.B., B.Ch., D.P.H. |
| Area No. 4. | J. L. Siddle, M.B., B.S., D.P.H. |
| Area No. 5. | P. A. Y. Narayanan, M.B., B.S., D.T.M., & H., D.P.H. |
| Area No. 6. | G. A. Macgregor, M.D., D.P.H. |
| Area No. 7. | R. G. Drummond, M.B., Ch.B., D.P.H. |
| Area No. 8. | A. S. M. Wilson, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H. |
| Area No. 9. | J. M. Hegarty, M.B., B.Ch., B.A.O. D.P.H. |
| Area No. 10. | M. W. Rodgers, M.B., B.Ch., B.A.O., D.P.H. |

MEDICAL OFFICERS OF HEALTH—DELEGATED AUTHORITIES

- Easington R.D.—J. W. A. Rodgers, M.B., B.Ch., D.P.H.
Stockton M.B.—H. J. Peters, M.B., B.Hy., D.P.H., D.P.A.

CONSULTANT OCULISTS (part-time)

- | |
|---|
| J. Frankenthal, L.R.C.P., L.R.C.S., D.O. |
| C. R. Kanagasundaram, M.B., B.S., D.O. |
| H. F. Lake, M.B., B.S., D.O. |
| J. McClemont, M.B., Ch.B., D.O.M.S. |
| V. G. O'Leary, M.B., B.Ch., B.A.O. |
| I. R. Robertson, M.B., B.Ch., D.O. |
| C. J. Sharp, M.B. Ch.B., D.O. (until 31.3.67) |

CONSULTANT PAEDIATRICIANS FOR SPECIAL SCHOOLS (part-time)

- J. D. Andrew, M.B., Ch.B., M.R.C.P., D.C.H.—
Windlestone Hall Residential Special School for delicate Pupils.

PSYCHIATRISTS (part-time)

- | |
|---------------------------------------|
| E. M. Bruce, M.B., B.S., D.P.M. |
| F. Murray, M.R.C.S., L.R.C.P., D.P.M. |
| M. Walley, M.B., Ch.B., D.P.M. |

DENTAL ANAESTHETISTS (whole-time)

- F. T. Hardy, M.B., Ch.B.

CONSULTANT DENTAL ANAESTHETISTS (part-time)

- | |
|---|
| J. A. Little, M.B., B.S., F.F.A.R.C.S. |
| G. F. Purves, M.R.C.S., L.R.C.P., M.B., B.Chir. |
| H. C. Saunders, M.B., Ch.B., F.F.A.R.C.S. |

PRINCIPAL SCHOOL DENTAL OFFICER

- M. M. Lishman, L.D.S., R.C.S.

DENTAL OFFICERS

- | |
|--|
| G. D. Bell, L.D.S., R.C.S. |
| M. Bywater, L.D.S. (until 30.4.67) |
| P. Chapman, B.D.S. |
| J. N. Cairncross, L.D.S., R.F.P.S. |
| R. M. Castledine, B.D.S. (until 30.4.67) |
| J. K. Christie, L.D.S. |
| M. Downes, B.D.S. (from 15.6.67) |
| N. A. Eddy, B.D.S. |

M. Hay, L.D.S.
C. P. Hurst, L.D.S.
V. N. Jordan, B.D.S.
K. Lamb, B.D.S.
C. S. Matthews, B.D.S.
M. Melrose, B.D.S. (until 31.5.67)
D. A. Newton, B.D.S. (until 31.5.67)
H. Riley, L.D.S.
W. M. Rouse, B.D.S.
M. A. Sainsbury, L.D.S.
D. J. Salway, B.D.S.
J. H. Wilkinson, B.D.S.

7 Part-time Dental Officers equivalent to 2·4 Whole-time.

COUNTY HEALTH INSPECTOR
T. S. Yarrow, C.R.S.H., F.A.P.H.I.

HEALTH VISITING SERVICE

SUPERINTENDENT

Miss M. Pattison, S.R.N., S.C.M. (Part 1), R.F.N., H.V. Cert., Nursing Administration (Public Health)
2 Deputy Superintendents. 110 Health Visitors.

SCHOOL NURSING SERVICE

24 School Nurses.

MIDWIFERY AND NURSING SERVICES

SUPERINTENDENT

Miss N. Hawkins, S.R.N., S.C.M., R.F.N., H.V. Cert., Q.I.D.N.
1 Deputy Superintendent. 2 Assistant Superintendents.
91 District Midwives. 18 District Nurse-Midwives.
108 District Nurses.

CHIEF NURSING OFFICERS

Easington R.D.—Miss A. Howarth, S.R.N., S.C.M., H.V. Cert., Q.N.S.
Stockton M.B.—Miss A. Hansbury, S.R.N., S.C.M., H.V. Cert., Q.I.D.N.

NURSERIES

4 Matrons. 37 Other Staff.

MENTAL HEALTH

EXECUTIVE OFFICER

J. Wilson, A.A.P.S.W.
21 Mental Welfare Officers.

TRAINING CENTRES FOR THE MENTALLY SUBNORMAL

8 Supervisors } Junior Training 1 Manager Warden } Adult Training
33 Other Staff } Centres. 7 Superintendents } Centres.
45 Other Staff }

HOSTELS FOR THE MENTALLY SUBNORMAL

Wardens 2 Deputy Wardens 1
Housemothers 3

DOMESTIC HELP SERVICE

1 Organiser. 19 Assistant Organisers

HANDICAPPED PERSONS

SENIOR EXECUTIVE SOCIAL WORKER

A. B. McManus

4 Senior Social Worker

17 Social Workers 2 Occupational Therapists.

BLIND PERSONS

17 Home Teachers

FAMILY WELFARE

SENIOR FAMILY WELFARE OFFICER

C. J. Carey.

AMBULANCE SERVICE

AMBULANCE OFFICER

C. G. Dewen

3 Staff Officers

3 Switchboard Operators.

26 Central Control Staff.

1 Liaison Officer.

14 Depot Superintendents.

305 Driver-attendants.

6 Depot Telephonists.

4 Mechanics.

1 Maintenance Officer.

WELFARE SERVICES—RESIDENTIAL ACCOMMODATION

ADMINISTRATIVE OFFICER

J. Scott

4 Superintendents.

25 Matrons.

2 Wardens.

433 Other Staff.

PART I

LOCAL HEALTH AND WELFARE

AUTHORITY SERVICES

COMMITTEES

The administration of matters affecting public health and of the National Health Service Acts, 1946-1952, and the National Assistance Acts, 1948 and 1951 in so far as they affect the County Council, devolve upon the Health Committee. In connection with the administration of the National Health Service Acts the following standing committees have been established :—

Maternity and Child Welfare.

Ambulances.

Midwifery, Home Nursing, Health Visiting and Domestic Help.

Mental Health.

E. F. Peile County Convalescent Home.

These sub-committees, with the exception of the Mental Health Sub-Committee which meets bi-monthly, have meetings in each month except August. In connection with the administration of the National Assistance Acts there is a standing Welfare Sub-Committee which meets monthly except in August.

AREA HEALTH SUB-COMMITTEES

The number of meetings held by the area health sub-committees during the year in accordance with the scheme adopted by the County Council in 1948 was as follows :—

No. of Area.	Names of County Districts comprised in the area.	Number of members.	Meetings held.	No. of Area.	Names of County Districts comprised in the area.	Number of members.	Meetings held.
1	Blaydon U.D. Ryton U.D. Whickham U.D.	20	4	6	Crook and Willington U.D. Tow Law U.D. Weardale R.D.	18	4
2	Jarrow Borough Felling U.D. Hebburn U.D.	21	5	7	Durham Borough Brandon U.D. Durham R.D.	20	5
3	Consett U.D. Stanley U.D. Lanchester R.D.	21	5	8	Barnard Castle U.D. Barnard Castle R.D.	15	4
4	Chester-le-Street U.D. Chester-le-Street R.D.	16	5	9	Bishop Auckland U.D. Shildon U.D. Spennymoor U.D.	20	4
5	Boldon U.D. Hetton U.D. Houghton-le-Spring U.D. Seaham U.D. Washington U.D.	25	4	10	Billingham U.D. Darlington R.D. Sedgefield R.D. Stockton R.D.	24	4

SECTION A—GENERAL STATISTICS

Area (in acres)							610,192
Registrar General's estimate of population, mid-1967	...	...	...	...	...	...	936,480
Rateable value as at the 1st April, 1967	...	...	...	...	...	...	£29,254,623
Sum represented by a penny rate	...	...	...	...	...	...	£116,871

LIVE BIRTHS

	1966			1967		
	Males.	Females.	Total.	Males.	Females.	Total.
Legitimate	8,279	7,882	16,161	7,827	7,321	15,148
Illegitimate	415	421	836	441	446	887
Totals	<u>8,694</u>	<u>8,303</u>	<u>16,997</u>	<u>8,268</u>	<u>7,767</u>	<u>16,035</u>

	Administrative County,			England and Wales.
	1965	1966	1967	1967
Live birth rate per 1,000 population	18.1	17.3	17.0	17.2
Illegitimate live births per cent of total live births ...	4.9	4.9	5.8	
Stillbirths	339	296	253	
Stillbirth rate per 1,000 total live and stillbirths... ...	18.9	17.1	15.5	14.8
Total live and stillbirths	17,940	17,293	16,288	
Infant deaths (deaths under 1 year)	362	357	332	
Infant mortality rates :—				
Total infant deaths per 1,000 total live births ...	20.6	21.0	20.7	18.3
Legitimate infant deaths per 1,000 legitimate live births	20.0	20.9	20.3	
Illegitimate infant deaths per 1,000 illegitimate live births	31.1	23.9	28.2	
Neo-natal (deaths under four weeks) mortality rate per 1,000 total live births	14.1	14.2	14.0	12.5
Early neo-natal (deaths under one week) mortality rate per 1,000 total live births.	12.0	11.6	11.3	10.8
Perinatal (stillbirths and deaths under one week combined) mortality rate per 1,000 total live and still births ...	30.7	28.6	26.6	25.4
Maternal deaths (including abortion)	4	2	2	
Maternal mortality rate per 1,000 total live and stillbirths	0.22	0.12	0.12	0.20
Total deaths from all causes	11,130	11,456	10,280	
Death rate per 1,000 population	11.4	11.7	10.9	11.2

AREA.

The area of the administrative county is 610,192 acres—145,099 in municipal boroughs and urban districts and 465,093 in rural districts—the mean density of population being 1.54 persons per acre.

The administrative county consists of three municipal boroughs, 21 urban districts and 9 rural districts. The area of each of these districts is given in Table 1, Part III.

POPULATION.

The Registrar-General's estimate of population for the Administrative County for mid-year 1967 is 936,480, which shows a decrease of 44,540 compared with his estimate for mid-year 1966. This decrease is the result of boundary changes which took place on 1st April, 1967, when part of Sunderland R.D. was transferred to Sunderland C.B.; the whole of Hartlepool M.B., together with a small part of Stockton R.D., were combined with West Hartlepool C.B. to form the new Hartlepool C.B.; and a small part of Darlington R.D. was transferred to Darlington C.B. The estimated population of each sanitary district in the Administrative County is also given in Table 1.

BIRTHS AND BIRTH-RATES.

The adjusted birth-rate for the administrative county, in accordance with the comparability factor (0.99) supplied by the Registrar General, is 16.8 per 1,000 population. Birth statistics for sanitary districts are shown in Table 1, Part III.

Hospital confinements comprised 74% of the total, the remaining 26% being domiciliary. Details of domiciliary and hospital confinements for the past five years are as follows:—

Year.	Percentage of Total Confinements.	
	Domiciliary.	Hospital.
1963	39	61
1964	35	65
1965	32	68
1966	29	71
1967	26	74

DEATHS AND DEATH-RATES.

The adjusted death-rate for the administrative county, in accordance with the comparability factor (1.18) supplied by the Registrar General, is 12.9 per 1,000 population.

The main causes of death in the administrative county were diseases of the heart and circulatory system (52.52%)—of which coronary disease figured prominently (24.28% of total deaths), all forms of cancer (19.32%)—of which 26.23% was due to cancer of the lung, bronchitis (5.60%) and pneumonia (4.56%).

Table 2—Part III gives a comparison of the percentages of deaths in certain age groups from the beginning of the century and further mortality statistics are provided in Tables 1, 3, and 4—Part III.

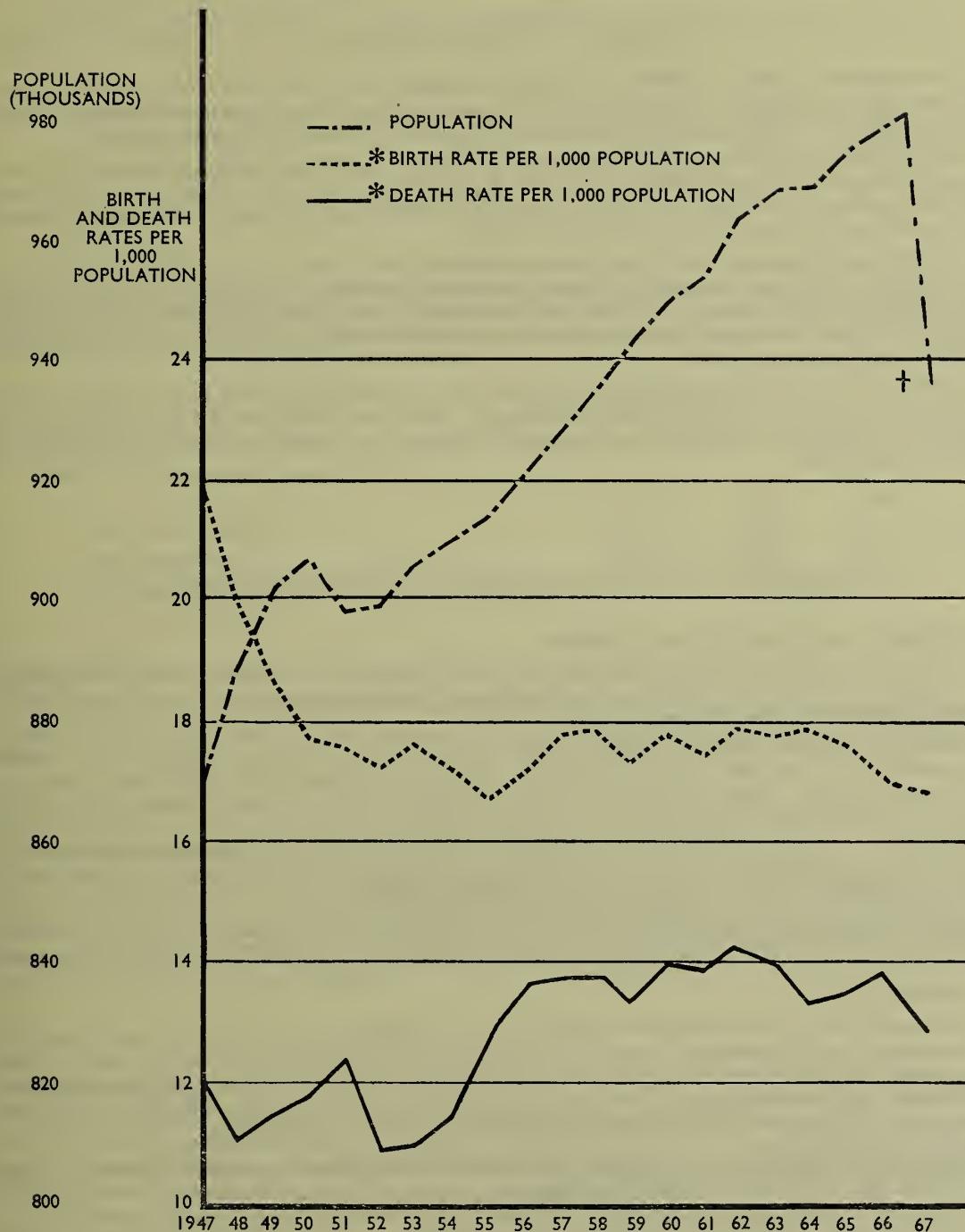
INFANT MORTALITY.

A comparison of infant mortality statistics for the past ten years is given in Table 5—Part III together with similar comparisons of the rates for perinatal mortality, early neonatal mortality and infant mortality one week to one year. All show a steady decline.

VITAL STATISTICS 1946-67.

The following graph shows comparative population statistics and birth and death rates for the past 21 years.

VITAL STATISTICS 1947-1967



* CRUDE RATES 1947-1954
RATES ADJUSTED BY COMPARABILITY FACTOR 1955-1967
† BOUNDARY CHANGES

SECTION B—NATIONAL HEALTH SERVICE ACT, 1946

SECTION 21—HEALTH CENTRES

The two Health Centres at Peterlee and Stockton continued to operate satisfactorily during the year. At Peterlee the four suites used by the general practitioners are shared by eight partnerships but at the end of the year work was almost complete on an extension to provide a further four surgery suites.

Work on the Health Centre at Leam Lane Estate, Felling, was nearing completion at the end of the year, and the building of the Dunston Health Centre and the conversion of the maternity and child welfare and school clinic premises at Boldon to a Health Centre by the addition of four general medical practitioner surgery suites were planned to commence early in 1968.

The Building Programme for 1968/69 makes provision for the erection of Health Centres at Hetton-le-Hole, Houghton-le-Spring, Hebburn and Washington and the possibility of adapting the existing maternity and child welfare clinic premises at Chilton to form a Health Centre was under investigation at the end of the year. Provision is also made in the Building Programme for Health Centres to be built at Spennymoor in 1969/70 and Stanley in 1970/71.

It has been the County Council's policy for some time to establish full Health Centres wherever these could provide a more comprehensive and co-ordinated health and welfare service for members of the community and the present progress has been possible because of the awakening interest and co-operation of general practitioners.

SECTION 22—CARE OF MOTHERS AND YOUNG CHILDREN

A. MATERNITY AND CHILD WELFARE CENTRES.

An increasing number of general practitioners in the County are now holding special child welfare sessions in their own premises for their patients but despite this attendances at the County Council Clinics remain high and continue to increase each year.

During 1967 purpose-built local authority centres were opened at Pelton and Seaham and the mobile clinic referred to in my 1966 report became fully operational, visiting Bishop Middleham, Gainford, Heighington, Hurworth, Evenwood, Etherley, Staindrop, Witton Gilbert, St. John's Chapel, Tow Law and Carlton. In many of these areas mothers have found it difficult to reach our existing premises and the improved service is much appreciated. Local halls provide waiting accommodation in association with the mobile clinics but otherwise the latter is completely self-contained and the facilities it provides are far superior to any which could be provided in country village premises.

A second caravan is being purchased and this will eliminate the use of other unsatisfactory premises and will be used also for medical examinations at old schools where present arrangements are inadequate.

1. *Ante-natal Clinics.*

The number of expectant mothers attending the local authority clinics for their ante-natal care continued to decline, and the number of centres at which ante-natal sessions were held (16) was one less than in the previous year. As reported last year this is the anticipated trend as more and more general practitioners institute their own ante-natal clinics. Free use of local authority clinic premises was offered to general practitioners for this purpose, and this facility was continued to be used in one area.

In areas where attendances do not justify a regular specific local authority session for this work, expectant mothers were seen during infant welfare sessions.

Details of attendances for the past four years are as follows :—

	1964	1965	1966	1967
No. on clinic register	1,721	1,457	1,253	1,318
Total attendances	6,947	6,065	5,191	4,590
Average attendance per session	5	5	5	6

2. Mothercraft and Relaxation Classes.

Classes were held at forty-three welfare centres. Details of the attendances compared with previous years were as follows:—

	1964	1965	1966	1967
Mothers attending ...	729	955	1,331	1,675
Total attendances ...	4,056	4,499	7,231	9,991
Average attendance/session	8	6	5	5

4. Post-Natal Clinics.

Examination of mothers six weeks after confinement was carried out at welfare centres either at special sessions when advice on family planning is also available or at one of the other welfare centre sessions. The post-natal clinics held at nine centres were attended by 84 mothers on 129 occasions and 45 examinations were carried out at other sessions.

5. Child Welfare Clinics.

Details of the attendances were:—

	1964	1965	1966	1967
No. on clinic registers ...	32,528	35,280	36,137	37,006
Total attendances ...	162,099	169,507	172,845	178,187
Average attendance/session	26	27	24	25

6. Mothers' Clubs.

With the advice and help of the health visitors a number of these clubs are now being run by groups of mothers in the county. There are now fourteen clubs being held either fortnightly or monthly in welfare centres.

7. Health Visitor Sessions.

The success of these sessions at which the screening tests of hearing are carried out continues. It is often valuable for health visitors to be able to arrange to see mothers by appointment at these sessions where more time can be taken to discuss family problems and the care of the children. The total attendances at these sessions was 10,753 the average per session being six. An increased number of sessions are also being held in general medical practitioners' surgeries.

8. Birth Control Clinics.

Advice on family planning was sought by 974 mothers at special sessions held in nineteen centres. The total attendances for 1967 was 2,544 compared with 2,638 in 1966. In accordance with Ministry of Health Circular 5/66 assistance has been given to the Family Planning Association in the setting up of four additional clinics in maternity and child welfare centres, making six in all.

The National Health Service (Family Planning) Act, 1967 confers on Local Health Authorities a general power to make arrangements for the giving of advice on contraception, the medical examination of persons seeking such advice and the supply of contraceptive substances and appliances.

The County Council decided to continue to provide this in medical cases only and in local authority clinics these are provided free of charge whilst in the case of patients referred to the Family Planning Association on medical grounds the annual fee and cost of supplies is now being borne by the County Council. During 1967 103 patients were so referred.

9. "At Risk" Register and Congenital Malformations.

In an attempt to ensure that there is the earliest possible ascertainment of physical or mental defects of the newly born child, a list is kept of those children where pre-disposing factors existed in the ante-natal and post-natal periods. These children are seen routinely at intervals after delivery.

At the end of the year there were 3,500 names on this register, compared with 3,860 at the end of 1966.

Arrangements continued for the notification to the Ministry of Health of congenital malformations apparent at birth.

Cases normally resident outside the county area are investigated and the relevant information forwarded to the appropriate local health authority. Similar arrangements are in being for cases occurring outside the administrative county area. During the year 198 cases were added to the County Council register and appropriate notifications forwarded to the Registrar General. Notifications were also forwarded in respect of congenital malformations found in 34 stillborn children.

Together with those other children whose names are on the "at risk" register, these infants are visited regularly and advice given to parents.

10. Audiology Services.

During the year the County Council approved a scheme for the implementation of a comprehensive audiology service which co-ordinates the existing arrangements and involves close liaison between the Health and the Education Departments. The Health Department will provide a diagnostic service and where necessary will refer children for specialist treatment. The Education Department will be responsible for parent guidance, pre-school training and education of children with hearing difficulties.

The diagnosis of deaf and partially hearing children will consist of:—

1. Screening tests done on children on "at risk" registers and if possible on all children between 9 to 12 months.
2. Co-operative tests—done on children on "at risk" registers who have passed the original screening test and who are now between 18 to 30 months.
3. Performance tests—done on children suspected of being deaf aged between $2\frac{1}{2}$ and 5 years.
4. Sweep tests—done on school children at the age of 5 years and any found to have defective hearing are referred for further investigation. It is hoped to extend the sweep test in the near future to cover children in the first year at junior school.

All failures from any of these tests will be sent to audiology clinics and those children requiring surgical or medical treatment will be referred to an otologist. Any other failures will be referred to a hearing assessment clinic. It is most likely if our screening system is adequate that all children referred to a hearing assessment clinic will require hearing aids and will need to be seen by a consultant otologist. At this stage it will be essential to discuss both the pre-school training of the young child and the education of the older child with the Organiser of Deaf Education. This means that there will have to be case conferences between the Health and Education Departments concerning the children. All information about the children would be common to the Health and Education Departments.

Once ascertained, training for both child and mother will be required. For children of statutory school age, training will be given in the units already provided and now in the process of being extended, or in schools for the deaf. For the children below statutory school age training will be given either in the home or in nursery units.

Regular visits will need to be paid to children's homes for discussions with parents, to schools to see those children wearing hearing aids and those who are known to have slightly impaired hearing not requiring the use of hearing aids.

Already within the last 18 months the number of pre-school children found having some degree of defective hearing has almost trebled, due to earlier ascertainment and it is probable that with the new procedure the number will continue to rise. There is a national shortage of trained teachers for the deaf and once training has begun it is essential for it to be continued by fully qualified teachers. The County Council is therefore taking every step to obtain the necessary skilled staff and to encourage teachers to undergo specialist training as soon as possible.

Up to the present time the Organiser for Deaf Education has been dealing unaided with the pre-school training as well as supervising units, hearing aids and visits to parents. However, the County Council have

agreed to the appointment of two peripatetic teachers to work under the supervision of the Organiser and they will visit homes of pre-school children, visit schools to see children with impaired hearing, organise and take group training in a nursery unit and if necessary teach in the partially hearing units during staff shortages.

It is hoped that this scheme can be implemented during 1968.

11. Welfare Foods.

Members of voluntary committees continued to make a valuable contribution to the work of the department by accepting responsibility for the distribution of welfare foods at 18 centres. National dried milk and vitamin preparations were obtainable from 128 centres including all child welfare clinics and 34 other premises.

The following statement shows the amounts issued during the year together with comparative figures for 1965 and 1966:—

			1965	1966	1967
National dried milk (tins)	...	...	139,497	110,030	81,942
Orange juice (bottles)	...	...	133,667	148,429	151,259
Cod liver oil (bottles)	...	...	18,297	17,761	17,025
Vitamin tablets (packets)	...	...	8,464	8,202	7,737

B. DENTAL TREATMENT OF MOTHERS AND YOUNG CHILDREN.

Treatment for the priority Dental Service was carried out at 17 permanent clinics and 7 mobile dental vans.

During 1967 there was a drop in the number of mothers coming to the clinics for treatment. Thus the number of fillings and extractions for mothers has decreased.

As regards pre-school children the numbers attending the clinics have increased. The number of fillings carried out on pre-school children has increased and the numbers of extractions has decreased which fortunately means that the dental treatment of pre-school children continues to improve.

Attendance figures for 1967 were:—

			Mothers.	Children.
First visits ...	...	...	156	388
Subsequent visits ...	...	...	266	247
Total visits ...	...	...	422	635
Additional courses of treatment commenced	...	...	2	20
Fillings ...	...	...	207	318
Teeth filled ...	...	...	176	281
Teeth extracted ...	...	...	337	467
General Anaesthetics ...	...	...	45	158
Emergencies ...	...	...	3	18
Patients X-rayed ...	...	...	5	3
Prophylaxis ...	...	...	96	59
Teeth otherwise conserved ...	...	...	—	100
Courses of treatment completed	...	...	125	240
Patients supplied with full upper or lower denture (First time)	...	...	17	—
Patients supplied with other dentures ...	...	...	27	—
Number of dentures supplied ...	...	...	52	—
First inspections ...	...	...	113	415
Requiring treatment ...	...	...	83	251
Offered treatment ...	...	...	81	248

C. CARE OF UNMARRIED MOTHERS AND THEIR BABIES.

Unmarried expectant mothers are accommodated in appropriate cases at the County Council's mother and baby home, Smelt House, Howden-le-Wear, where there are 17 beds and 9 cots. The number of expectant mothers admitted during 1967 was 87 and the average length of stay was six weeks before confinement and four weeks after discharge from hospital.

When there were no vacancies at Smelt House and in cases where it was considered advisable that a mother should be accommodated elsewhere, other arrangements were made and for these reasons 38 expectant mothers were admitted to homes outside the county.

D. E. F. PEILE HOME, SHOTLEY BRIDGE.

This convalescent home, which is administered by the County Council, has accommodation for nine mothers with infants and 24 children.

During the year further improvements have been made to the accommodation both of staff and residents and a considerable amount of redecoration and refurnishing has been carried out.

Recommendations for convalescence were made by general practitioners, assistant welfare medical officers, health visitors and hospital almoners and 121 mothers, 74 infants and 229 children were admitted during 1967. The average duration of stay was 19 days for mothers, 20 days in the case of infants and 22 days for children.

The E. F. Peile Home is approved by the Ministry of Health for the training of nursery nurses, and four students were under training at the end of the year.

E. DAY NURSERIES.

The four day nurseries in the county are all approved for training purposes. A total of 205 places are available and details of the accommodation and average attendance at each establishment were as follows :—

Nursery.	Number of Places.			Average Attendances.
Haverton Hill	20	13
Hebburn	65	44
Stockton—				
(a) Durham Road	...	60		41
(b) Norton Road	...	60		34

Information regarding registered nurseries and daily minders is given in Section G.—Page 58

F. COUNTY FEDERATION OF VOLUNTARY WORKERS.

Meetings were held on four occasions during the year. These meetings give an opportunity for members to exchange ideas and to hear of the work carried out in the County as a whole. Talks were given on the work of the County Child Welfare Services by the Senior Medical Officer (M. & C.W.), on the slow learning child in society by a headmaster and 20 years of health visiting by one of the County Council health visitors.

G. PERINATAL MORTALITY.

During the year there were 434 perinatal deaths (stillbirths plus deaths in the first week of life) compared with 494 in 1966.

An investigation first started in 1956 and continued annually in the Stanley and Consett Urban Districts into the circumstances of all stillbirths and early neonatal deaths and including post mortem examinations of the infants has continued. The results of these investigations are reported at meetings of general practitioners, hospital medical staffs and local health authority medical officers in the area. Information on the cause of death, associated avoidable factors, etc. is provided and discussed.

The importance of adequate ante-natal care and proper selection of hospital cases becomes very obvious during these investigations. The co-operative effort between general practitioners, hospital and local health authority services is found to be very beneficial.

H. PREMATURITY.

The number of premature live births fell in 1967 to 1,072 compared with 1,202 in the previous year. The proportion of all live births which were premature for the two years was 6.7% and 7.1% respectively.

Three quarters of the infants who died during the first year of life were premature and the majority of these deaths occurred during the first month.

The neonatal mortality rate of premature babies was 143.5 per 1,000 premature live births compared with a rate of 4.7 for mature infants.

Details of premature births according to place of delivery and birth weight are given below :—

Weight at Birth.	Born in Hospital.			Born at home or in a nursing home.					
				Nursed entirely at home or in a nursing home.			Transferred to hospital on or before 28th day.		
	Total Births.	Died within 28 days.	% died.	Total Births.	Died within 28 days.	% died.	Total Births.	Died within 28 days.	% died.
2 lb. 3 oz. or less ...	40	39	98	—	—	—	1	1	100
2 lb. 3 oz.— 3 lb. 4 oz.	75	36	48	2	—	—	5	4	80
3 lb. 4 oz.— 4 lb. 6 oz.	191	29	15	2	—	—	18	2	11
4 lb. 6 oz.— 4 lb. 15 oz.	180	9	5	10	1	10	20	2	10
4 lb. 15 oz.— 5 lb. 8 oz.	413	9	2	97	2	2	18	2	11
Totals	899	122	14	111	3	3	62	11	18

Care of Premature Infants Born at Home. Equipment for the home nursing of premature infants, including lined "Sorrento" cots, with mattress, blankets, sheets, hot water bottles, gamgee outfits and "Belcroy" feeders is available at short notice to any midwife who requires it.

There is a special unit for premature infants at both the Richard Murray Hospital, Blackhill, and Dryburn Hospital, Durham, and, if in other areas, institutional treatment is considered desirable the general practitioner arranges admission to a paediatric unit.

An incubator for the transport to hospital of premature babies is kept constantly warmed at the Ambulance Headquarters, Framwellgate Moor, and arrangements are in operation for the use of incubators based at Newcastle upon Tyne, Darlington, Gateshead, South Shields, Sunderland and Hartlepool Ambulance Depots and at four hospitals in the County area.

I. MATERNAL MORTALITY.

The following are details of maternal mortality in the county during the past ten years :—

		<i>Births registered (live and still).</i>	<i>No. of Maternal deaths.</i>	<i>Maternal Mortality Rate. per 1,000 births registered.</i>
1958	...	17,827	8	0.45
1959	...	17,384	6	0.35
1960	...	18,045	6	0.33
1961	...	17,806	5	0.28
1962	...	18,269	6	0.33
1963	...	17,983	4	0.22
1964	...	18,087	2	0.11
1965	...	17,940	4	0.22
1966	...	17,293	2	0.12
1967	...	16,288	2	0.12

One of the "maternal deaths" occurring during 1967 involved a mother in the 20-29 years age group, the other being in the 30-39 years age group. The deaths were due to post-partum thrombophlebitis and puerperal renal cortical necrosis respectively, neither of which could be attributed to lack of care during pregnancy or delivery.

J. MATERNITY LIAISON COMMITTEES.

During the year there were meetings of two Maternity Liaison Committees in the area, at Sunderland and Shotley Bridge. This enabled representatives from the three sections of the Health Service to meet together and discuss current problems.

SECTION 23—MIDWIFERY

(i) STAFF.

At the end of the year 91 district midwives and 18 district nurse-midwives, who spent approximately half their time on midwifery duties, were employed and relief work was undertaken by three midwives. Difficulties in recruitment resulted in a shortage of staff in certain areas and the services of four midwives were retained beyond normal retirement for this reason.

Car allowances were paid to 82 district midwives who used their own cars on duty.

The following numbers of midwives gave notice of intention to practice in the administrative county during the year :—

District midwives	...	...	...	...	107
District nurse-midwives	...	...	...	...	25
Midwives in hospitals	...	...	...	...	119
Midwives in private practice	...	...	...	...	2
<hr/>					<u>253</u>
<hr/>					<u> </u>

(ii) CASES.

Although domiciliary confinements continued to decrease, more patients were discharged from hospital before the tenth day, particularly those returning home within 48 hours of delivery. A doctor was present at 16% of the domiciliary confinements.

	1965	1966	1967
Domiciliary confinements during the year	5,696 (32%)	4,927 (29%)	4,123 (26%)
Total hospital confinements	12,208 (68%)	12,321 (71%)	12,031 (74%)
Hospital patients discharged before the tenth day	5,773 (47% of hospital deliveries).	5,840 (47% of hospital deliveries).	6,039 (50% of hospital deliveries).
Hospital patients discharged within 48 hrs. of delivery	—	—	1,226 (10% of hospital deliveries).

It is recognised and accepted that if the maternal and perinatal mortality and morbidity rates are to be reduced further, certain expectant mothers belonging to the "high risk" groups should be delivered in hospital, where any complications occurring can be recognised and dealt with without delay. Unfortunately, because of the shortage of hospital maternity beds it is at present quite impossible to achieve this objective. However, greater use is being made of the available beds by discharging selected mothers earlier than the accustomed tenth day.

While this practice can be valuable, it must be done in a controlled way, good co-operation must exist between all sections of the maternity service—and there must be pre-planning, unity of purpose and continuity of care.

In addition to reporting any abnormality in a mother or baby, details about infants considered to be "at risk" were notified to me so that these children could be registered and kept under supervision.

In order to improve the liaison in the domiciliary maternity services midwives continued to attend a number of ante-natal clinics held by general practitioners in their surgeries, and it was possible to make more of these arrangements during the year.

Midwives attended courses on relaxation and mothercraft and continued to put the training into practice at ante-natal and child welfare clinics.

The following gives details of work undertaken during 1967:—

	Doctor not booked.		Doctor booked.		Totals.	Discharges from hospital before 10th day.
	Doctor present at delivery.	Doctor not present at delivery.	Doctor present at delivery.	Doctor not present at delivery.		
District midwives and nurse-midwives... ...	18	48	620	3,412	4,098	6,034
Midwives in private practice	—	—	11	14	25	5
Total	18	48	631	3,426	4,123	6,039

The midwives requisitioned medical help on 1,622 occasions, and the following statement gives particulars as to the reasons for so doing :—

1. Ante-natal examination—general	...	...	...	...	...	...	111
2. Ante-natal examination—albuminuria	...	...	...	...	...	...	152
3. Threatened miscarriage	...	...	...	...	...	...	17
4. Miscarriage	...	...	...	...	...	...	8
5. Contracted pelvis, disproportion between child and pelvic outlet	...	...	...	...	...	...	3
6. Malpresentation	...	...	...	...	...	...	77
7. Ante-partum haemorrhage	...	...	...	...	...	...	63
8. Placenta praevia	...	...	...	...	...	...	1
9. Prolonged or delayed labour, uterine inertia	...	...	...	...	...	...	247
10. Post-partum haemorrhage	...	...	...	...	...	...	44
11. Retained or adherent placenta or membranes	...	...	...	...	...	...	39
12. Ruptured perineum	...	...	...	...	...	...	438
13. Premature birth	...	...	...	...	...	...	39
14. Puerperal pyrexia	...	...	...	...	...	...	26
15. Other conditions of mother	...	...	...	...	...	...	102
16. Inflammation of child's eyes	...	...	...	...	...	...	34
17. Congenital malformation	...	...	...	...	...	...	23
18. Other conditions of baby	...	...	...	...	...	...	146
19. Stillbirth	...	...	...	...	...	...	11
20. Neonatal death	...	...	...	...	...	...	—
21. Other reasons	...	...	...	...	...	...	41

(iii) COURSES AND TRAINING.

Lectures by senior nursing administrative staff were given to groups of pupil midwives, and domiciliary midwifery training continued under the supervision of nine teaching midwives 21 of the 25 pupils were successful in Part II of the examination of the Central Midwives Board, two failed, the remaining two still being under training at the end of the year.

Post graduate courses were attended by 16 district midwives in accordance with the rule of the Central Midwives Board.

SECTION 24—HEALTH VISITING.

The shortage of staff became even more acute during the year due mainly to a number of retirements and to movement of the younger married health visitors with their husbands to other areas of the country. In an increasing number of areas only an emergency service was possible. This is a most unfortunate situation particularly in view of our mutual desire to improve liaison with general medical practitioners.

The serious situation of staffing was relieved a little by a review of the relative responsibilities of health visitors and school nurses and by the consequent reduction of certain school work undertaken by health visitors.

Advertisements were placed nationally and locally for part-time health visitors but the response was poor and some full-time staff with home commitments elected to work part-time. Four health visitors were transferred to the Sunderland and Hartlepool Boroughs when re-organisation of the County borough areas took place and staff were needed for the extra clinic sessions which were started in the mobile clinic.

At my request a survey of the work of the health visiting service was undertaken by the County Council's Management Services Unit during the year and the report is expected shortly.

An increasing number of hospital student nurses visited the health visitors during the year as part of their nurse training. A number of health visitors were engaged in the practical training of health visitor students from the Durham and other training schools.

The family service given by the health visitors continued covering all aspects of the health and welfare of the family an ascertainment, assessment and health educational service—especially in the case of the expectant and nursing mothers, infants, school children, those suffering from or in contact with cases of tuberculosis, the aged and mentally subnormal children. The supervision of children "at risk" continued, special emphasis being paid to cases of congenital abnormality or disability.

Enquiries were made into cases of stillbirths and child deaths from all causes. Special care was taken to try to obviate the "Battered Baby Syndrome", this being used as a topic for in-service training. Health visitors and moral welfare workers continued to work together in the care of the unmarried mother and her child. The Children's Officer continued to notify the whereabouts of the children "in care". A great deal of intensive home visiting was necessary in some cases to prevent the break up of families. Health visitors attended special case conferences regarding these families and worked with other statutory and voluntary bodies in advising, educating and providing material help for them.

HEALTH EDUCATION.

Health education continued with the individual in the home and with group discussions in child welfare centres, mothers' clubs, professional and other groups and in some schools.

Mothercraft and Relaxation Classes continued satisfactorily, although in some areas numbers attending were low. Health visitors benefited in this sphere during the year by the provision of display material in child welfare centres and by the advice and material assistance given by the Health Education Officer and his section. Health visitors assisted at the County Show.

Three health visitors continued contact tracing and health education duties in relation to venereal disease.

SCREENING TESTS FOR PHENYLKETONURIA.

Screening tests were carried out in 15,138 cases. One case of phenylketonuria was admitted to hospital for further investigation under the care of a Consultant Paediatrician.

DETECTION OF HEARING DEFECTS IN YOUNG CHILDREN.

Screening tests of hearing were carried out during the year on children from the age of seven months to five years at the child welfare centres. This service has been extended to all children and is not confined only to children in the "at risk" groups. In some cases tests were carried out in the home.

IMMUNISATION AND VACCINATION.

Health visitors continued to advise on the immunisation and vaccination of children under five years of age at child welfare centres or by general practitioners. They spent a good deal of time carrying out and assisting in immunisation and vaccination of older groups and the Heaf testing for tuberculosis infection and follow-up of positive school entrants continued during the year. Health visitors participated in a pilot scheme in the Durham area to evaluate propaganda material on this subject.

TUBERCULOSIS.

Liaison with chest physicians continued. Health visitors continued to advise tuberculous cases and their families in their own homes. Contacts were advised regarding the spread of infection. Tuberculin testing in chest clinics, schools and in homes in the Durham and Felling areas continued and health visitors assisted with B.C.G. vaccination and follow-up. Advice was given to the tuberculous family and to "domestic helps" working with these families.

THE MENTALLY SUB-NORMAL.

Visits were made to advise the mentally sub-normal and their families in their own homes. Mental welfare officers and health visitors worked jointly in a number of cases and responsibility for all adults was taken over by the mental welfare officers.

HEALTH VISITOR AND GENERAL PRACTITIONER LIAISON SCHEME.

Efforts were made to increase liaison with general practitioners and discussion on cases of mutual interest proved valuable. No two groups of practitioners seek exactly the same type of liaison scheme and this added to the interest in this work during the year. Common ground for discussion was found in the care of the young, the aged and infirm and in community care after discharge from hospital.

HOSPITAL FOLLOW-UP.

Co-operation continued with hospital medical staff and medical social workers. Cases were investigated prior to and following discharge from hospital and advice given on all aspects of care in the community. This service increased during the year. The admission to maternity hospitals on social grounds of ante-natal cases continued following investigations by the health visitors. These investigations continued to be time consuming because of the number of expectant mothers at work.

THE AGED.

Home visits were paid according to need. Health visitors continued to co-operate with statutory bodies and voluntary organisations in the care of the aged at home. Co-operation was maintained with general practitioners and medical social workers and together with the social workers a special follow-up service was provided for the aged whose names were on the waiting list for residential accommodation.

SUMMARY OF THE WORK DONE BY HEALTH VISITORS.

The work of the health visitors for 1966 and 1967 is summarised below.

Maternity and Child Welfare :—

										1966	1967
Ante-Natal First visits	...	...	...	...	...	...	...	...	...	4,984	4,951
Revisits	...	...	...	...	...	...	...	...	...	2,015	2,307
Births First visits	...	...	...	...	...	...	...	...	...	17,921	16,664
Revisits to children under 1 year	...	...	...	...	...	...	...	...	...	46,255	43,571
Revisits to children 1-5 years	...	...	...	...	...	...	...	...	...	129,534	126,779
Revisits to children 5-6 years	...	...	...	...	...	...	...	...	...	91	149
Other visits	...	...	...	...	...	...	...	...	...	6,009	6,284
									Total	206,809	200,705

Tuberculosis :—

										1966	1967
First visits	...	...	...	...	...	...	...	...	...	505	467
Revisits	...	...	...	...	...	...	...	...	...	4,471	3,962
Other visits	...	...	...	...	...	...	...	...	...	656	576
									Total	5,632	5,005

School Work :—

										1966	1967
School Children (Home visits)	...	...	...	...	...	...	...	...	...	11,873	7,744
School Children (School visits)	...	...	...	...	...	...	...	...	...	2,083	1,860
									Total	13,956	9,604

General Health :—

										1966	1967
Visits	...	...	...	...	...	...	...	...	...	6,357	8,502

Mental Subnormality :—

										1966	1967
Visits paid to mentally subnormal persons	...	...	...	...	...	...	...	...	...	5,087	4,046

Aged People :—

										1966	1967
Visits	...	...	...	...	...	...	...	...	...	22,709	22,630

Summary :—

										1966	1967
Total number of visits	...	...	...	...	...	...	...	...	...	297,698	290,992
Time (as days) spent on visits (routine, other and ineffective)	...	...	...	...	...	...	...	...	...	13,505	13,272

STAFF.

At the end of the year the health visiting staff numbered 110 including four working part-time only. Staffing remained much below establishment during the year.

SECTION 25—HOME NURSING

(i) STAFF.

In addition to 108 whole-time district nurses on the staff at the end of 1967 there were 18 district nurse-midwives who spent approximately half their time on home nursing duties. A further 31 nurses were employed on relief work during the year.

At the end of the year 88 nurses and 14 nurse-midwives were authorised car users.

(ii) CASES.

The total number of cases dealt with and visits paid by home nurses during 1967 showed little change from the previous year. Of the total case load 52% were over 65 years of age and this group received 63% of the visits paid.

The "Night Sitters" service for cancer patients in the terminal stages of their illness continues with the financial support of the Marie Curie Memorial Foundation.

Help has continued to be given in the form of grants of money for extra nourishment through the Foundation.

Good liaison between nurses and general practitioners was maintained and there were more contacts with medical social workers in the care of patients discharged from hospitals.

(iii) COURSES AND TRAINING.

Student nurses from Shotley Bridge General Hospital, Bishop Auckland General Hospital, Sedgefield General Hospital and Dryburn Hospital accompanied home nurses for observation visits on the district as a part of their training, and lectures on home nursing were given to them and also to student nurses at Sedgefield General Hospital by senior nursing administrative staff.

Seven district nurses were seconded to the training school at Newcastle upon Tyne for district nursing training all of whom were successful in passing the examination.

Home nursing statistics are given in Table 6—Part III.

SECTION 26—VACCINATION AND IMMUNISATION

DIPHTHERIA, WHOOPING COUGH, TETANUS, POLIOMYELITIS AND SMALLPOX.

Leaflets drawing attention to the need for children to be protected against these diseases and giving details of the facilities available for vaccination and immunisation are sent to parents by post when their children attain the age of three months. Further leaflets are despatched when children are one year old.

The health visitors are supplied with details of the vaccination and immunisation state of children in their areas so that they may, during their routine visiting, encourage parents to take advantage of the facilities. Advice is also given by assistant welfare medical officers and health visitors at child welfare centres.

The vaccinations and immunisations are carried out by the general practitioners at their surgeries and by the assistant welfare medical officers at child welfare centres.

During the year schemes of vaccination and immunisation were undertaken in infant schools in all parts of the County.

A successful campaign of intensive publicity was carried out between April and June in one area of the with a view to raising the acceptance rates of immunisation and vaccination. Details are given in the report of the Health Education Officer.

In view of the striking improvement in acceptance rates achieved by the small number of authorities using computer techniques in the provision of vaccination and immunisation services the desirability of introducing a computer operated system in the County has been investigated with the invaluable assistance of the County Management Services Unit, and it has been decided to start operating such a system in one area in June 1968. Depending upon the degree of success of this pilot project it is proposed to eventually extend this system to all areas in the County.

Tables 7 and 8, Part III, give details of the numbers of children vaccinated and immunised in the County throughout the year.

SECTION 27—AMBULANCE SERVICE

1. PRESENT ARRANGEMENTS.

The service operates by means of a central control at Framwellgate Moor, Durham City, two subsidiary message receiving centres, 18 ambulance depots, 140 ambulance vehicles and 364 staff.

These are distributed as follows :—

(a) Headquarters and Central Control Staff.

Ambulance Officer.	8 Assistant Controllers (Operations).
3 Staff Officers.	Assistant Controller (Planning).
Control Superintendent	12 Control Room Assistants.
Maintenance Officer.	3 Switchboard Operators.
2 Controller (Operations).	2 Shorthand Typists (1 part-time).

(b) Depots.

	<i>Driving Staff.</i>	<i>Vehicles.</i>		<i>Driving Staff.</i>	<i>Vehicles.</i>
Barnard Castle	... 2	1	Newton Aycliffe...	... 4	2
Bishop Auckland	... 25	10	Seaham ...	... 15	6
Chester-le-Street	... 16	7	Stanley ...	... 16	7
Consett	... 15	6	St. John's Chapel	... 2	2
Crook	... 14	5	Stockton ...	... 35	12
Durham	... 27	12	Washington ...	... 15	6
Fishburn	... 18	7	Wheatley Hill ...	... 29	10
Hebburn	... 26	10	Winlaton ...	... 22	9
Middleton-in-Teesdale	2	1	Headquarters Pool	... —	19
New Herrington	... 22	8			

(c) Other Staff.

14 Depot Superintendents. 1 Liaison officer. 6 depot telephonists (including 1 part time). 4 mechanics.

To ensure that peripheral parts of the county are covered for emergency purposes the County Council has arrangements with the County Boroughs of Darlington, Hartlepool and South Shields, whereby the Borough ambulance services undertake journeys for the County Council a charge being made to the County Council. The charges made are on a mileage basis with a minimum call-out fee in the case of Darlington County Borough.

2. WORK UNDERTAKEN IN 1967.

Year.	No. of Journeys made.	No. of patients carried.			Total Mileage covered.
		Stretcher cases.	Sitting cases.	Total.	
1966	96,665	50,415	347,029	397,444	2,624,199
1967	96,695	50,277	352,286	402,563	2,696,792
Increase	30	—	5,257	5,119	72,593
Decrease	—	138	—	—	—

Despite the loss of responsibility for the Borough of Hartlepool and the Sunderland Rural District on the 1st April, there was an increase in the number of patients conveyed during the year.

Long Distance Journeys. The following is a statement of long distance journeys undertaken during the year :—

Cumberland	...	...	...	37	Westmorland	...	...	...	2
Somerset	...	...	...	1	Yorkshire	...	...	...	33
Lancashire	...	...	...	1					
			Totals :	Journeys		...	...	74	
				Mileage	...	...	12,464		

In addition to the long distance journeys undertaken by ambulances, arrangements were made for 121 patients to be transported by rail. Trends and detailed statistics from 1948 are shown in Table 9, Part III.

Thirty-four new ambulances entered the service during the year and orders were placed for four ambulances for delivery during the financial year, 1967/68, and eleven during financial year 1968/69.

At the end of the year there was a full establishment of 140 vehicles operating, 6 more than at the end of 1966.

	<i>Ambulances</i>	<i>Light</i>
	<i>Conventional.</i>	<i>Sitting-case</i>
Number of vehicles at beginning of year	...	53
Unserviceable and withdrawn during the year	...	2
New vehicles	...	8
Number of vehicles at end of year	...	59
		81

Four mechanics are employed and operate from repair units located at Crook, Durham and Stanley. Major repairs are carried out at the Central Repair Depot of the Highways and Bridges Committee.

The Ambulance Service, together with the Home Help Service, are the most expensive services provided by the Health Department, the former costing an estimated £620,000. 0s. 0d. in the current financial year.

Work was completed on the new Control building and the premises were occupied on the 24th June. These new premises will enable development of the Control system to be carried out. To this end plans have been made to install Telex and an improved telephone system.

The use of the Robophone system which was installed in 1965 was extended to other hospitals and selected group practices.

When building work on the Control was completed extensions to the Headquarters building work commenced which will not be complete until late 1968. The Durham Depot and mechanics workshops which are adjacent to Headquarters were decorated and refurbished, together with the installation of central heating, to give a pattern which will be followed at other depots in turn.

The liaison officers at two hospitals were withdrawn and replaced by hospital staff in pursuance of Ministry of Health O & M Report on Out-Patient Services and arrangements have been made for the remaining liaison officer not to be replaced by the ambulance service when he retires in February 1969.

In October the drivers at Stockton and Hebburn Depots imposed bans on normal working. At Stockton this took the form of refusal to convey out-patients, the cause of the refusal being the employment of casual drivers as mentioned above. At Hebburn Depot drivers refused to be available for work at overtime rates on their rest days and free days, the cause being the order of calling in personnel on such days.

Casual labour was again recruited to provide temporary driver/attendants during the holiday period of the permanent driving staff but before the end of the year a trade union had made a representation to the effect that in future the permanent drivers would not work with casual labour and arrangements were commenced with a view to obtaining permanent relief drivers for future years.

The arrangement entered into with the National Coal Board for emergency ambulance cover at week-ends was extended for another year.

The arrangement was continued during the year in conjunction with the ambulance services of Newcastle and Northumberland whereby a twice weekly service to and from the Silloth Convalescent Home, Cumberland, was provided by one authority transporting from Newcastle to the Home and back patients residing in the two geographical counties and the geographical county of North Riding of Yorkshire. Each constituent authority is responsible for conveying its patients to and from Newcastle.

This Authority continues to be responsible for conveying cases of smallpox and suspected smallpox in the geographical counties of Cumberland, Northumberland and Durham and also the northern parts of Westmorland and the geographical county of North Riding of Yorkshire, as the smallpox hospital for these areas is at Langley Park. All drivers are offered annual revaccination against smallpox and annual arrangements are made for the protected drivers to visit Langley Park Hospital.

SECTION 28—PREVENTION OF ILLNESS, CARE AND AFTER-CARE.

I. TUBERCULOSIS.

Existing services operating in the county are as follows :—

A. B.C.G. Vaccination.

Routine vaccination is carried out by the chest physicians at the chest clinics and during the year 1,236 contacts were skin tested and 1,120 vaccinated.

Tuberculin testing and vaccination of all schoolchildren aged 11 years and upwards is arranged by the assistant county medical officers. During the year 11,364 school children were skin tested, 12.8% were found to be tuberculin positive and 9,187 were vaccinated.

134 students attending further education establishments were skin tested 23.9% were positive and 98 vaccinated.

B. Tuberculin Testing of School Entrants.

The tuberculin testing of school entrants to indicate if they have been in contact with a case of tuberculosis was continued. The skin tests are carried out by the health visiting staff one week prior to the scheduled medical examinations the result of the test being read by the school medical officer at the medical examinations. During the year 215 schools were visited, 8,640 children were skin tested and 118 (1.4%) were found to be tuberculin positive and referred to a chest physician for further investigation. Of these one was notified as a new case of tuberculosis.

C. Occupational and Diversional Therapy.

No occupational therapist is directly employed solely for the tuberculous but the staff dealing with the handicapped persons were available during the year. Use was made whenever possible of help which could be obtained from the Ministry of Social Security and voluntary agencies such as care committees and the British Red Cross Society.

D. Incidence and Mortality.

The number of primary notifications of respiratory tuberculosis received during the year was 286 and of non-respiratory tuberculosis 27, compared with 297 and 35 respectively in 1966. (See Tables 10, and 11—Part III). The total notifications for the year (313) show a decrease of 19 compared with 1966 and give an incidence rate for all forms of tuberculosis of 0.33 per 1,000 population, the rate for 1966 being 0.34.

Tables 12 and 13—Part III give the number of deaths from respiratory and non-respiratory tuberculosis under relevant age periods and in separate county districts and areas.

The number of deaths from respiratory tuberculosis (53) has decreased by twenty-five. There were six deaths from non-respiratory tuberculosis in 1966 and 1967.

Tables 14 and 15—Part III give details of the incidence of tuberculosis since 1937.

Comparisons of the respiratory tuberculosis death-rate for the years 1963-1967 are shown below :—

<i>Rate per 1,000 living.</i>	1963	1964	1965	1966	1967
Municipal Boroughs in the County ...	0.07	0.05	0.09	0.12	0.05
Urban Districts	0.04	0.07	0.06	0.06	0.04
Rural Districts	0.07	0.06	0.06	0.09	0.10
Administrative County	0.06*	0.06*	0.07	0.08	0.06*
England and Wales	0.06	0.05	0.04	0.04	0.04†

* This death-rate of 0.06 per 1,000 population is the lowest on record for this administrative county.

† Provisional.

Over the years, and particularly recently, the character and incidence of tuberculosis has changed, and is still changing considerably. The massive wide spread infections of the past have disappeared and as with many other previously endemic infectious diseases we have now reached the stage of having to deal with sporadic cases or small localised outbreaks. On examination of the statistics it is seen that while the trend found in the country as a whole over the last 20 years is similar to that in this county, rates were originally higher in the county, but decline has been more rapid and they are now similar.

Future duties and responsibilities of a local health authority in attempting the eradication of tuberculosis must include :—

- (1) Taking an active part in health education to prevent the spread of tuberculosis.
- (2) Being responsible for tracing contacts in consultation with chest physicians, possibly carrying out tuberculin testing in the home.
- (3) Making provision for tuberculin testing of school entrants with follow-up of positives and also using them as indicators of a source of infection.
- (4) Arranging B.C.G. vaccination of school children in 11 year + age group.
- (5) Supervising patients at home when advised to do so by chest physicians or general practitioners.
- (6) Carrying out after-care work—extra comforts, nursing appliances, domiciliary nursing and home helps.
- (7) Providing diversional or occupational therapy.

To further these ends, health visitors should attend tuberculosis out-patient departments.

II. VENEREAL DISEASES.

The venereal diseases treatment centres are administered by hospital management committees and the figures in Table 16,—Part III, have been compiled from returns submitted by hospitals where such clinics are held, and are in respect of patients from the Administrative County who attended during the year. Patients very often prefer to attend a clinic outside the area in which they live so the incidence of disease in an area may not necessarily follow the pattern of any particular clinic.

Social work was undertaken by three health visitors as a normal part of their duties, and the health visitor appointed by the Sunderland Authority continued to work in parts of the Administrative County and in South Shields, as well as in Sunderland.

III. CANCER.

Table 17 of Part III gives the number of cancer deaths in each sanitary district during 1967 tabulated to show the organs affected together with the sex and age incidence. The following are comparative statistics in respect of total cancer mortality (including lung cancer) for the administrative county and England and Wales for the past ten years.

YEAR.	DURHAM COUNTY.		ENGLAND AND WALES.	
	Deaths.	Death-rate	Deaths	Death-rate
1958	1,807	1.93	97,000	2.15
1959	1,921	2.04	98,393	2.17
1960	1,895	1.99	100,169	2.19
1961	1,895	1.98	101,233	2.19
1962	2,002	2.08	102,852	2.20
1963	1,941	2.00	103,810	2.21
1964	1,912	1.97	106,194	2.24
1965	1,980	2.03	107,770	2.26
1966	2,100	2.14	108,142	2.25
1967	1,986	2.10	*110,055	2.28

* Provisional.

Cancer of the lung has shown the only real increase in recent years. This is shown in the following mortality rates for the County.

Year.	Deaths.			Total Death-Rate per 1,000 population.
	Males.	Females.	Total.	
1958	310	59	369	0.39
1959	345	56	401	0.42
1960	320	47	367	0.39
1961	355	47	402	0.42
1962	394	67	461	0.48
1963	405	52	457	0.47
1964	422	58	480	0.49
1965	407	63	470	0.48
1966	449	60	509	0.52
1967	441	81	522	0.55

Cervical Cytology

The demand for cervical smear tests fell, particularly in the second half of the year and consequently sessions were not held as regularly as previously but were arranged at various centres when required.

Advertisements in the press appeared to have little effect in increasing demand for the tests and it was, therefore, decided to hold a cervical cytology campaign during October. Information about the cytology service was sent out to general practitioners with an offer to supply them with posters, leaflets and request cards if required and arrangements were made for publicity material to be displayed in child welfare centres and branch libraries throughout the county. Details of the campaign were sent to the local press who were most helpful in giving publicity to the value of the smear tests. The response to the campaign was disappointing and it was decided that the next step should be to make the test available if possible at places of work. This scheme has been very satisfactory although it had been applied to only a very limited extent by the end of the year. Sessions were held in County Hall and also at the offices of the Post Office Savings Certificate Division in Durham by kind permission of the Controller and the response was most encouraging. It is intended that this service will be offered to other organisations where there are appreciable numbers of female employees.

Sessions were continued at the seven centres operating in 1966 including those at Peterlee in Easington Rural District and at Stockton. In addition frequent sessions were held at Seaham and Washington and occasionally at Crook, Staindrop, Stanhope and Stanley.

Apart from the sessions held in office premises and those at Stockton, all sessions were held in the evening. The doctors, nurses and clerical staff who run the clinics were ably assisted by the voluntary services of British Red Cross Society members.

During the year, 6,108 smears were taken and the number of positive cases detected was 45. Since the service was introduced in August, 1965, 16,005 smears have been taken and the incidence of positive cases was 6.8 per 1,000.

Madam Curie Foundation.

In addition to acting as agents for the "Night Sitter" Service the County Council also acted for the Madam Curie Memorial Foundation in the provision of extra nourishment and clothing for cancer patients.

IV. NURSING EQUIPMENT.

A central store of appliances is maintained in the Health Department and a local store of smaller articles of equipment at Chester-le-Street. Stores are also maintained at Easington and Stockton. Issues are made on the recommendation of a doctor, health visitor, district nurse or medical social worker. District nurses maintain a general supervision, notifying the Health Department when the equipment is no longer required.

Liaison with medical social workers of the hospitals receiving patients from the administrative county is maintained.

Over 80 different items were provided during the year.

All types of nursing equipment are now issued on loan free of charge.

V. CONVALESCENT HOMES.

During the year arrangements were made, on medical recommendation, for the admission of 62 county patients to convalescent homes for recuperative holidays as follows :—

The Metcalfe Smith House, Harrogate	...	4	Rose Joicey Home, Whitburn	...	52
Silloth Convalescent Home	...	...	...	6	

In 40 instances the County Council was responsible for the full maintenance charges and in the remaining 22 cases contributions were required from the patients or their families.

Applications from 20 other patients were withdrawn for various reasons.

The Metcalfe Smith House, Harrogate, closed on 25th September, 1967.

VI. HEALTH EDUCATION.

(a) Health and Welfare Services Handbook.

The publicity and information handbook *Health and Welfare Services* was completed and distributed to all members of the County Council, staff of the Health and Welfare Department, general practitioners, hospitals, area health offices and district council offices and other interested organisations and individuals. As the information contained in the book can become out of date very quickly, revision will begin early in 1968. Revision will be completed in four instalments, the whole of Part II, which gives details of services and staff in each district, being completed every year.

(b) Visual Aids.

The extension of the visual aids service continued throughout the year. A comprehensive stock of materials is available for the use of all staff. The materials include posters, pamphlets, films, slides, tape recordings, cine-cassettes, small exhibitions, photographs and flannel graphs. The projectors, screens, etc., which are required to use these materials are available and can be borrowed by any member of staff. Thorough instruction is given in the use of machines available, and it is hoped that ultimately all members of staff who undertake teaching duties will be fully trained in the use of visual aids and machinery available in the section.

(c) Monthly Topics.

Each month, publicity material on a particular subject is distributed to child welfare centres. Subjects which have been publicised in this way in 1967 included the dangers of cigarette smoking, immunisation, cervical cytology, home safety, holiday safety, dental health, food hygiene, home hygiene, nutrition and the problems of the elderly. In addition to posters and pamphlets; slides, films and other materials relevant to the topic are also available if required. Twenty centres which are owned by the County Council now have fixed peg-boards, while thirty six centres rely on folding peg-board display units.

(d) *Smallpox Vaccination Campaign.*

Between 1st April and 30th June a pilot public education campaign was organised in Durham Municipal Borough. The campaign was designed to develop methods involving the co-ordination of a number of educational techniques. The objective was to raise immunisation rates, special attention being paid to primary smallpox vaccination of children in their second year. The campaign was designed to make fullest use of the services of County Council field staff working in the area and all health visitors, domiciliary midwives, welfare medical officers, school nurses and district nurses co-operated in the project. General practitioners in the area were asked to co-operate and all agreed to do so. Posters were produced for display in buses, clinics and public buildings. Pamphlets were widely distributed, talks given to interested parent groups, and small exhibitions were prepared for display in child welfare centres. The figures shown in the tables indicate that the campaign was successful in raising vaccination figures.

Primary Smallpox Vaccination.

<i>Durham M.B.</i>	<i>April-September, 1966</i>		<i>April-September, 1967</i>	
	<i>Under 1 year</i>	<i>1 year</i>	<i>2-4 years</i>	<i>6</i>
Under 1 year	...	4		6
1 year	...	50		116
2-4 years	...	9		20

Triple Antigen Vaccination (Whooping Cough/Diphtheria/Tetanus).

<i>Durham M.B.</i>	<i>April-September, 1966</i>		<i>April-September, 1967</i>	
	<i>Primary</i>	<i>Booster</i>	<i>Primary</i>	<i>Booster</i>
Durham M.B.	...	98	66	176
Durham Administrative County	...	6,686	4,028	6,803

(e) *County Show.*

The Health and Welfare Department again participated in the County Council exhibit at the County Show. The theme in 1967 was "Growth and Progress". This theme was developed by a study of the services provided at the child welfare centres in the County.

(f) *Health Education Advisory Committee.*

During the year, the Health Education Advisory Committee was formed to develop syllabuses in health education for introduction into schools. This joint committee of staffs of the Education and Health and Welfare Departments under the chairmanship of the Deputy Director of Education will decide on the content of the syllabuses and their introduction experimentally into certain schools in the County.

(g) *Northumberland and Durham Home Safety Council.*

The County Council became members of this organisation in 1967. It is an association of representatives of local authority Home Safety Committees, which meets quarterly to discuss and exchange ideas on home safety. The Northumberland and Durham Home Safety Council report to, and work in close co-operation with, the Home Safety Division of the Royal Society for the Prevention of Accidents. The Health Education Officer attends meetings of the Council and it is hoped that this will facilitate a greater co-ordination of home safety activities undertaken by the various Home Safety Committees in the County.

VII. CHIROPODY.

This service, initially provided by voluntary organisations in a limited number of areas of the Administrative County, was accepted as a County Council responsibility on the 27th February, 1963. At that time it was decided that in the first place aged persons and at a later date handicapped persons and expectant mothers would be eligible for free chiropody treatment. A County Council service was therefore started with the employment of full-time chiropodists and the schemes run by voluntary organisations who were employing registered chiropodists were reimbursed the cost of running approved schemes.

Despite continuing difficulty in the recruitment of full-time chiropodists, the chiropody service for the elderly continued to expand with the opening of 18 new clinics using the services of part-time staff. At the end of the year the staff consisted of the chief chiropodist, seven full-time senior chiropodists and nine chiropodists working on a sessional basis.

The mobile clinic was in use on an average of four days per week and proved most valuable in providing suitable surgery conditions in places where adequate accommodation could not be obtained. A new mobile clinic was placed on order during the year and when this is available it will be possible to increase the service where the caravan is essential and also to start the service in other remote areas.

At present the County Council is financing 48 schemes run by voluntary organisations. Equipment, which includes chiropodist chair, dressings trolley and angle poise lamp, is loaned free of charge to schemes holding frequent regular sessions and items were issued to a number of new schemes.

The total number of treatments given in 1967 was 63,672, compared with 54,812 in the previous year.

The following statistics show the extent of the service given during the year:—

	<i>Direct Service.</i>	<i>Voluntary Organisations.</i>	<i>Stockton M.B.</i>	<i>Easington R.D.</i>	<i>Total.</i>
Chief Chiropodists	1	Nil	Nil	Nil	1
Chiropodists (whole-time)	4	Nil	1	2	7
Chiropodists (part-time)	8	11	1	Nil	20
Treatment Centres	64	48	3	9	124
Persons Treated :—					
(a) Elderly	7,465	5,322	703	963	14,453
(b) Handicapped	Nil	4	Nil	Nil	4
Treatments :—					
(a) Elderly	24,344	24,257	3,352	5,218	57,171
(b) Handicapped	Nil	22	Nil	Nil	22

In addition, 796 residents in hostels for the elderly were given 6,479 treatments.

During 1967, grants amounting to £7,647. 0s. 0d. were made to voluntary organisations.

VIII. PROVISION OF INCONTINENCE PADS.

The demand for disposable incontinence pads increased markedly during the year as the service became more widely known and the number of pads issued was 208,705 compared with 112,208 in 1966.

SECTION 29—DOMESTIC HELP SERVICE

The demand for the service showed a further increase in 1967 and a greater number of households were provided with help than previously. The elderly and infirm comprised 86.0% of those receiving assistance and amongst the remainder were 32 families with special problems 22 of whom were still receiving help at the end of the year.

ORGANISATION.

Apart from the delegated areas of Easington and Stockton the County is divided into 17 areas, each supervised by an assistant organiser who engages and places the home helps. The assistant organiser investigates applications for help which are received from general practitioners, hospital and local authorities' medical and nursing staff and officers of other statutory and voluntary bodies, and also makes regular visits to the houses where helpers are employed to ascertain any changes in the circumstances and to ensure efficient deployment of staff to assist those with the greatest need.

All assistant organisers are employed full time and are encouraged to undertake the training course organised jointly by the Institute of Home Help Organisers and the N.A.L.G.O. Correspondence Institute. Future applicants for Assistant Organisers posts will be asked to undertake the course.

Talks about the service were given on six occasions.

HOME HELPS.

The home helps are a body of practical social workers, with experience in running a home, care of the elderly and management of children. They comfort and counsel the people they serve and are encouraged to have a cheerful and optimistic outlook as well as sympathetic understanding of the needs of the elderly. Helpers attending cases of tuberculosis are tuberculin tested and have a chest x-ray when they are assigned to the case and annually thereafter, so long as they are in contact with the disease.

CHARGES.

The charge for the service was 6/6d. per hour at the end of December but the amount payable was reduced in accordance with the scale of charges which takes into account the ability of the family or individual to pay. 95% of the total cases receive a free service.

COST.

The estimated cost of the service for the financial year, 1967/68, was £617,000—£659 per 1,000 population. Although costly it is a most valuable community service, frequently making the difference between hostel or hospital admission and independence and continuing life in the community. Its more intangible value of dispelling loneliness, providing advice, support and the early ascertainment of specific needs is beyond question.

The following is a summary of the work accomplished :—

Cases being assisted at 1st January, 1967	...	...	...	...	...	...	7,082
*New cases assisted during the year	...	...	...	...	...	...	3,256
Total number of cases assisted during year	...	...	...	...	...	...	10,338
†Cases terminated	...	...	...	...	...	...	2,849
Cases being assisted at 31st December, 1967	...	...	...	...	...	...	7,489
Cases on waiting list at 31st December, 1967	...	...	...	...	...	...	262
Visits paid by Assistant Organisers	...	...	...	...	...	...	77,771
Number of domestic helps employed at end of year (part-time)	...	...	...	...	...	...	3,781

* Includes 561 cases which ceased and recommenced later in the year.

† And includes 147 cases transferred to Sunderland C.B. and 111 cases transferred to Hartlepool C.B.

<i>Types of Case Assisted during the year.</i>	<i>Percentage of Total.</i>					
Maternity (including expectant mothers)...	0.9
Tuberculosis	0.4
Chronic sick (including aged and infirm)	97.1
Others	1.6

MENTAL HEALTH

ADMINISTRATION.

(a) The Mental Health Sub-Committee of the County Health Committee is responsible for the administration of the Mental Health Service.

(b) Staff—

Mental Health Executive Officer	...	...	...	...	...	...	...	1
Mental Welfare Officers	...	...	...	...	...	...	...	23
Supervisors, Junior Training Centres	...	...	...	...	...	...	...	8
Assistant Supervisors, Junior Training Centres	...	...	...	...	...	...	...	16
Trainees Assistant Supervisors, Training Centres	...	...	...	...	...	...	...	26
Warden/Manager, Residential Adult Training Centre	...	...	...	...	...	...	...	1
Matron, Residential Adult Training Centre	...	...	...	...	...	...	...	1
Assistant Matron, Residential Adult Training Centre	...	...	...	...	...	...	...	1
Superintendents (Male) Adult Training Centres	...	...	...	...	...	...	...	7
Deputy Superintendents (Female) Adult Training Centres	...	...	...	...	...	...	...	7
Assistant Supervisors, Adult Training Centres	...	...	...	...	...	...	...	6
Craft Instructors, Adult Training Centres	...	...	...	...	...	...	...	19
Workroom Mistress, Adult Training Centre	...	...	...	...	...	...	...	1
Warden (Hostels)	...	...	...	...	...	...	...	2
Deputy Warden (Hostels)	...	...	...	...	...	...	...	1
Housemothers	...	...	...	...	...	...	...	3

The excellent co-operation with hospital consultants continued to be maintained and a number of cases were referred to hospital out-patient clinics for assessment and advice regarding the future treatment and training. The department has continued to have the part-time services of Dr. M. R. Walley, Consultant Psychiatrist, who visited training centres and has advised on a number of difficult cases. School medical officers carried out the routine annual medical examinations of all those attending training centres. Arrangements were also made for the examination of trainees at adult centres at the mass radiography units.

During the year two mental welfare officers continued in their last year of a two years course leading to the Certificate in Social Work at the College of Commerce, Newcastle upon Tyne. Both officers returned to duty after having successfully completed the course. One mental welfare officer attended an induction course organised by the National Association for Mental Health at Leeds. One superintendent of an adult training centre, eight trainee assistant supervisors and three craft instructors were seconded to take courses leading to the Diploma for Teachers of the Mentally Handicapped. Of the six training centre staff seconded on courses last year, five were successful in obtaining the Diploma for Teachers of the Mentally Handicapped. A total of 28 training centre staff have obtained qualifications as a result of the Council's policy of seconding trainees on approved one and two year courses. Two hundred and sixty staff from training centres from neighbouring authorities and Durham County attended a regional study day at Durham Technical College.

WORK UNDERTAKEN IN THE COMMUNITY.

1. *In relation to mentally sub-normal persons:*—

(a) Ascertainment—cases of mental subnormality are notified by school medical officers, child welfare medical officers, private practitioners, hospital staff, health visitors and social workers. As previously stated very full use was made of hospital out-patient facilities for the diagnosis of mental sub-normality and advice on prognosis and disposal. The scheme brought into operation in 1960 for routine testing of all infants born in the County to detect cases of phenylketonuria has been continued.

(b) Under the provision of the Education Act, 1944, the local education authority made the following notifications to the local health authority under Section 57:—

	<i>M.</i>	<i>F.</i>	<i>Total.</i>
Children considered unsuitable for education within the school system	32	38	70
Children who require further supervision after leaving school	17	15	32

(c) On the 31st December, 1967, there were 3,510 mentally sub-normal persons on the register giving an ascertainment figure of 3.75 per 1,000 population in the Administrative County area. During the year 103 were added to the County Council register compared with 166 during 1966.

(d) Supervision—the supervision of mentally sub-normal persons has been carried out mainly by health visitors who made 4,046 visits during the year. Mental welfare officers continued to take over supervision of adult sub-normals in the County Area.

(e) Guardianship—there was no guardianship case in the County at 31st December.

(f) Junior Training Centres for mentally sub-normal persons—the number of pupils receiving training at junior centres on 31st December were as follows:—

Centre.	No. of Pupils.
Bishop Auckland	40
Chester-le-Street	35
Consett	44
Durham (including special care)	46
Hebburn	44
Newbottle	18
Easington	37
Stockton	58
Darlington	3
Gateshead	3
South Shields	2

In addition 17 children attended as day pupils at Prudhoe and Monkton Hospital.

Transport to the centres, mid-morning milk and mid-day meals are provided at each centre while regular routine dental and medical examinations are carried out on all pupils.

The special care unit at Durham Junior Centre for children whose physical and mental handicaps render them unfit for training in the normal junior centre classes, which was brought into use at the end of 1964, has continued to fill a very real need and on the 31st December, seven children were in attendance.

A special care unit at Chester-le-Street Junior Training Centre was opened during the year and on 31st December seven children were in attendance.

(g) Adult training centres for mentally sub-normal persons—the numbers of trainees receiving training at adult training centres on the 31st December were as follows:—

Centre.	No. of Trainees.
Bishop Auckland	73
Consett	24
Durham	59
Fencehouses	63
Hebburn	60
Lanchester (Day)	36
Lanchester (Residential)	29
Easington	33
Stockton	36

Twenty-two adult trainees also attended as day patients at Prudhoe and Monkton Hospital.

During the year inter-centre activities continued to take place and a successful sports day was held at Bishop Auckland in May, when Fencehouses Adult Training Centre won the championship shield. Inter-centre football matches were played during the Autumn, and the youth clubs at Bishop Auckland and Consett Centres continued with their activities.

An outdoor training scheme for adult trainees was held at the County Education Department's training centre at Ireleshopeburn, Weardale, in September. Thirty adult trainees and six staff from adult training centres attended, and this project was so successful that it is intended to extend it in the future.

Bishop Auckland Training Centre—This centre is now well established and contracts were obtained from local firms for the assembly of large wooden crates, carding of buttons, film labelling and re-packing, and the assembly of machine accessory kits. Female trainees were shown the art of hairdressing and make-up and this part of the centre activities was greatly appreciated. Two trainees were found outside employment during the year.

Consett Adult Training Centre—This centre was opened in October and provides places for thirty trainees. On 31st December there were 24 trainees in attendance, and these were engaged in simple handicrafts, chopping and bundling sticks. It is expected that contracts will be obtained when the centre is well established.

Durham Adult Training Centre—During the year outside employment was found for three trainees. There has been a continuous supply of contract work from outside firms, and the car washing scheme continued to be successful. This centre again obtained the County Council contract for the manufacture of clothes airers for use in schools and other County Council establishments. The youth club continued with its activities, and the attendances at social evenings were satisfactory.

Fencehouses Adult Training Centre—During the year one trainee was placed in outside employment. Contracts with outside firms have been maintained, and the hairdressing and make-up section, introduced during the year, has proved to be most popular with the female trainees. Trainees continued to pay weekly visits to a local indoor swimming bath. The superintendent of this centre completed a one year course for Teachers of Mentally Handicapped Adults, and was successful in obtaining the Diploma.

Hebburn Adult Training Centre—This centre was opened in January and has made satisfactory progress during the year. A contract for letter enclosing was obtained from a large outside company, and bundles of sticks and folding clothes props were sold to local firms. A printing section was introduced towards the end of the year and it is expected that this will extend in the future.

Lanchester Adult Training Centre—Three trainees were placed in outside employment during the year. The centre has continued to obtain contracts with local firms for the manufacture of wooden reels for barbed wire, bread trays and the assembly of electrical components. The printing section maintained progress, and there was an increase in the amount of garden produce during the year. Training in make-up, hairdressing and manicuring continued to be popular with the female trainees. On 31st December there were 16 full-time residents at the centre, and 13 who were accommodated on a five day week basis.

Easington Junior and Adult Training Centres. The junior centre continued to operate satisfactorily during the year and on 31st December, 1967, 37 children were in attendance.

The new purpose built adult training centre at Easington was opened on 13th March 1967 and at the end of the year 33 trainees were in attendance.

Stockton Junior and Adult Training Centres. During the year the planned programme of expansion at both centres was continued. The junior centre caring for 58 children and the adult centre with 20 boys and 16 girls. In the adult centre the males continued with contract work and the females continued to produce good quality rugs, mats, aprons, etc.

(h) Hostels for the Mentally Handicapped—during the year two purpose built hostels for the mentally handicapped were opened at Aykley Heads, Durham, and Walker Drive, Bishop Auckland. The Aykley Heads hostel provides 20 places for mentally sub-normal children and on 31st December 11 children were resident; the hostel at Walker Drive provides 25 places for mentally sub-normal women and on 31st December there were 12 women in residence.

(i) *Hospital Admissions*—During the year six patients were admitted to hospital under Order and 15 were admitted informally under the provisions of Circular H.M. (58)5, also during the year 127 patients were admitted to hospital for short term care in accordance with the terms of Circular 5/52 of the Ministry of Health. Details of all admissions are given in Table 19 Part III.

2. *In relation to Mentally Ill Persons*—

During the year mental welfare officers continued to investigate cases under the Mental Health Act, 1959, at the request of consultant psychiatrists, general medical practitioners and police, etc., and Table 19 Part III gives details of admissions arranged by them.

The very close liaison with hospitals has been maintained and the practice of mental welfare officers attending psychiatric out-patient clinics and case conferences has been continued. On 31st December, 1967, 1,089 cases, mainly referred from psychiatric hospitals were under the supervision of mental welfare officers.

SECTION C—PREVALENCE OF INFECTIOUS DISEASES

Tables 20, 21, 22, 23, and 24—Part III give particulars of cases of infectious disease occurring during the year, and the mortality from the principal infective diseases.

Scarlet Fever. There were 279 cases and no death. The corresponding figures for 1966 were 339 cases and no death.

Whooping Cough. The number of cases (543) decreased by 112 when compared with the previous year. There was no death in 1967 compared with one in 1966.

Diphtheria. For the ninth year in succession there was no confirmed case.

Measles. The number of cases 8,633 showed an increase of 624. Three deaths were registered. The case rate was 9 per 1,000 population.

Pneumonia. Notified cases decreased from 115 in 1966 to 65 in 1967. There were 469 deaths recorded.

Meningococcal Infection. During the year there were 13 cases and four deaths. In 1966 the figures were 15 cases and three deaths.

Acute Poliomyelitis. One case (Paralytic) was recorded during the year compared with none in 1966.

Acute Encephalitis. Ten cases were notified compared with 14 in the previous year.

Dysentery. A total of 593 cases occurred, an increase of 295 cases compared with the previous year.

Enteric or Typhoid Fever. Three cases were recorded during the year compared with one in 1966. One death occurred in 1967, compared with none in 1966.

Paratyphoid Fever. In 1966 there was one case compared with two this year. No death was recorded in either year.

Food Poisoning. During the year 17 confirmed cases were recorded compared with 36 in the previous year.

Influenza. The number of deaths registered was eight, equal to a death-rate of 0.008 per 1,000 population compared with 66 deaths and a death-rate of 0.07 in 1966.

Diarrhoea and Enteritis (under 2 years of age) During 1967 15 deaths were registered compared with 16 in 1966. The death rates per 1,000 population (0.016) and per 1,000 live births (0.94) were the same in both years.

Puerperal Pyrexia. During the year there were 45 confirmed cases of puerperal pyrexia, compared with 61 in 1966. No death was registered from puerperal sepsis.

According to information received 32 cases had hospital in-patient treatment.

Ophthalmia Neonatorum. There was one case of ophthalmia neonatorum notified during the year.

SECTION D—NATIONAL ASSISTANCE ACT, 1948

WELFARE SERVICES

I. WELFARE OF THE PHYSICALLY HANDICAPPED.

(a) *Register.*

At the end of the year there were 1,405 males and 1,195 females on the register of physically handicapped. This shows an increase of 177 during the last year. On 1st April, 49 cases were transferred to Sunderland County Borough, 28 to Hartlepool County Borough and two to Darlington County Borough, as a result of boundary changes. These physically handicapped persons were referred by hospitals, general practitioners, other staff of the health and welfare department, while the remaining cases came from various other statutory and voluntary social agencies, patients' friends and in some cases from the patients themselves.

(b) *Welfare Work for the Physically Handicapped.*

The Senior Executive Social Worker continued to supervise the work of social workers and also that of the home teachers of the blind. During the year two senior social workers and one student social worker were appointed while the number of general social workers employed increased to twenty. During the year social workers continued to be based at offices in eleven different parts of the county.

The kind of help given to physically handicapped persons has varied widely. House alterations have been arranged and financed in co-operation with district councils, while a wide variety of aids for handicapped persons have been supplied. Other patients who have not needed material help have been given support by the social workers in facing their personal and family problems. There is also a scheme whereby Local Housing Authorities may obtain grants from the County Council towards the provision of houses specifically designed for physically handicapped persons.

(c) *Holiday Scheme for Physically Handicapped.*

With the agreement of the Education Committee, the Health Committee were able to sponsor a further holiday scheme for physically handicapped persons at Windlestone Hall, a special residential school, during the period 28th July to 25th August. Ninety-five handicapped persons had the advantage of a holiday at Windlestone during this four week period. The majority of the handicapped persons were conveyed to Windlestone Hall by ambulance, the remainder finding their own way. The British Red Cross Society carried out the day to day administration, providing the staff for the project, and the venture was a great success. The British Red Cross are again to be congratulated on their magnificent effort.

A holiday course for twenty-seven physically handicapped teenagers was arranged in connection with the Durham County Association of Youth Clubs at Seaham Grammar/Technical School during the period 29th July to 5th August. This was a residential course during which period tuition was given in art, photography, handicrafts and music. The Education and Health Committees shared the cost of this holiday and the Durham County Association of Youth Clubs are to be congratulated for making this holiday course a success.

(d) *Occupational and Diversional Therapy.*

Two occupational therapists are employed by the Health Committee. They visit handicapped persons in their homes in order to train them and assist them in various crafts. Assistance is also given by craft instructors who attend meetings of clubs for physically handicapped.

(e) *Car Badges for Disabled.*

At the end of the year 268 car badges were in use by disabled drivers to enable them to obtain parking privileges. New applications for badges are made at the expiry of the disabled person's driving licence or at the time a new vehicle is obtained.

(f) Voluntary Organisations.

The County Council has worked in co-operation with the Durham County Association for the Welfare of the Physically Handicapped and during the year made a further grant to help them in their work. The number of social clubs for physically handicapped persons sponsored by the County Association remains at 22. These clubs continue to be invaluable as meeting places for physically handicapped persons, where they can take part in social, as well as handicraft activities.

A vehicle, specially adapted for the transport of physically handicapped persons, particularly those confined to wheelchairs, belonging to the County Association was taken over by the Health Committee on long term loan, as the Association had had great difficulty in running the vehicle on a voluntary basis. A driver was appointed and the vehicle came into use on the 29th August. This has enabled many seriously handicapped persons to attend the meetings of ten handicapped persons clubs who have availed themselves of these facilities.

Eight young people attend the day work centre at the Percy Hedley School for Spastics of whom six are resident in the Chipchase Hostel.

The Training and Work Centre administered by the Sunderland and District Spastics' Society (a voluntary organisation) had, at the end of the year, fourteen of our adult spastics who were unable to obtain employment on account of their disability. Transport by taxi was provided for ten spastics who would otherwise have been unable to attend the Centre, the cost of this transport being accepted by the County Council.

(g) Residential Accommodation for Physically Handicapped.

Residential accommodation is provided for 49 physically handicapped persons at homes outside the County, run by voluntary organisations.

II. WELFARE OF THE BLIND AND PARTIALLY SIGHTED.

(a) Register and Registration of Blind Persons.

The number of blind persons on the County Council's register on the 31st December was 1,763, 92 less than at the end of 1966, 36 cases being transferred to Sunderland County Borough and 41 to the new Hartlepool County Borough on the 1st April as a result of boundary changes.

Blind population according to age and sex.

	1 & under	2-4	5-10	11-15	16-20	21-29	30-39	40-49	50-59	60-64	65-69	70-79	80 & over	Total
Male ...	2	1	9	12	12	25	37	81	110	75	73	196	180	813
Female ...	—	3	8	9	9	8	22	50	98	78	95	288	282	950
Total ...	2	4	17	21	21	33	59	131	208	153	168	484	462	1,763

During the year the names of 247 blind persons were added to the register including 24 blind persons transferred into the County from other areas. Following surgical treatment, sight was restored to six persons previously registered as blind, all of whom were certified neither blind nor partially sighted. During the period under review 335 blind persons died or left the county area.

The seven part-time ophthalmologists appointed by the County Council examined 356 cases referred to them while in addition 30 forms B.D. 8 were submitted by other ophthalmologists. These 386 cases are classified as follows :—

First Examination :—

No. certified blind	...	...	...	...	...	...	...	...	...	...	...	...	...	163
No. certified partially sighted	...	...	...	...	...	...	...	...	...	...	...	...	...	80
No. certified not blind	...	...	...	...	...	...	...	...	...	...	...	...	...	44

Re-examinations :—

No. certified blind (7 already certified)	...	...	...	...	...	...	...	57
No. certified partially sighted	...	...	...	...	...	...	...	28
No. certified not blind	...	...	...	...	...	...	...	14

One case of retrorenal fibroplasia was reported during the year.

(b) Register of Partially Sighted.

The number of partially sighted cases on the register at the 31st December was 421, the sex and age classification being :—

	0-1	2-4	5-15	16-20	21-49	50-64	65 & over	Total.
Male	—	3	32	15	33	18	97	198
Female	—	1	20	11	29	20	142	223
Total	—	4	52	26	62	38	239	421

On 1st April, nine cases were transferred to Sunderland County Borough and two to Hartlepool County Borough.

In all cases of cataract, glaucoma, or any other disability a letter is addressed to the patient's private doctor informing him of the findings and the recommendations of the ophthalmologist.

High Myopia. It has been the practice for many years for the school health service to notify the Health Department of all school leavers suffering from high myopia who are not registered blind or partially sighted persons. These cases are followed up by health visitors to ensure that the children continue to wear suitable spectacles and obtain replacements where necessary. Advice and assistance is given regarding suitable employment.

(c) Employment.

The following information relates to trained blind persons in employment at the end of the year :—

	<i>Institution Workers.</i>	<i>Home Workers.</i>
Royal Institution for the Blind, Sunderland	...	38
Cleveland & South Durham Institute for the Blind, Middlesbrough	...	15
Hartlepool Workshops for the Blind, West Hartlepool	...	2
National Library for the Blind, Braille Copyists	...	—
Catholic Blind Institute, Liverpool	...	1

On the 31st December the number of trained but unemployed blind persons was 10.

(d) Home Teaching Service.

There are 17 qualified home teachers for the blind, of whom three are registered blind persons.

These members of the staff visit blind and partially sighted persons, teaching braille and moon type when required and acting as general social workers for all blind and partially sighted persons on the register. Six of the home teachers hold classes for the teaching of handicrafts, while the remaining home teachers provide tuition in handicrafts in the homes when required.

(e) *Social Centres.*

Seven centres are established and operating in the County with the co-operation of the voluntary agencies. Home teachers visit the centres and provide help and guidance when necessary.

(f) *Placement Service.*

By arrangement with the Ministry of Labour, use has been made of their Placement Officers in finding and placing suitable persons in open industry.

(g) *Holidays.*

The Health Committee provided a week's holiday at Scarborough for 15 deaf blind persons, together with their attendants. The detailed arrangements for this holiday were made by the North Regional Association for the Blind.

(h) *Homes for the Blind.*

At the end of the year there were 44 blind persons in homes for the blind, 39 of these being residents in Palatine House, Durham, the County Council hostel for the blind. The remaining five lived in homes outside the County.

III. WELFARE OF THE DEAF.

The County Council scheme under Section 29 of the National Assistance Act approved by the Minister on the 27th September, 1952, operates throughout the county. Most of the work is carried out on an agency agreement by the Northumberland and Durham Mission to the Deaf and Dumb for the northern part of the county and the South Durham and North Yorkshire Association for the Deaf for the southern part of the county. Welfare officers visit and look after general welfare of registered persons. Four hard of hearing clubs operate throughout the county to which the County Council make a grant for administration, maintenance charges and equipment. At the end of the year the number of persons registered as deaf or hard of hearing was 836 classified as follows :—

			<i>M.</i>	<i>F.</i>	<i>Total.</i>
Under 16 years	...	...	25	49	74
16-64 years	...	...	333	261	594
65 years and over	...	...	85	83	168
Total	...	...	443	393	836

At the end of December 35 school children (18 boys and 17 girls) were attending residential schools for the deaf, outside the county area.

On 1st April 36 cases were transferred to Sunderland County Borough and 17 to Hartlepool County Borough.

IV. WELFARE OF THE ELDERLY.

One of the results of improved medical and social services is that more people live longer and the deterioration associated with old age tends to be delayed. This deterioration in physical and/or mental faculties when it does occur frequently necessitates the deployment of a variety, or occasionally the whole range, of the authority's staff, employed to deal with the blind or partially sighted ; the deaf ; the physically handicapped ; the mentally disturbed ; the sick and the bed-ridden.

Over the years the elderly have been using an increasing proportion of the health and welfare services and this trend will obviously continue. During 1967, 62% of district nurses time, 11% of health visitors time and 87% of home helps were employed assisting old people in this county.

The basic need of the elderly is for a home of their own where they can enjoy privacy and comfort with the social contacts which they desire.

Houses of suitable size and design are, therefore, particularly important, supplemented, where necessary, by welfare services including communal facilities, emergency bell systems, warden services, "meals on wheels" or "meals by neighbours" services, chiropody services, and adequate home nursing, home help and health visitor advisory services. Despite these services the time may still come when this support is insufficient and it is then that accommodation in a residential County Council hostel is needed. Here again the object must be to keep the elderly as happy as possible and out of hospital as long as possible.

During the year, to encourage the provision of communal facilities, warden services etc., in association with houses for old people the County Council continued to make grants to district councils of a maximum of £60 per house per annum when such facilities are provided.

An expansion of home help and after-care service was necessary and greater financial assistance was given to schemes providing chiropody, meals on wheels, meals by neighbours and luncheon club services.

Continued support, financial and otherwise, was given to the Durham County and Tees-side Old People's Welfare Committee, a voluntary organisation which has been most successful in the sponsoring of clubs for old people and various social functions such as choir festivals.

The policy to provide more hostel accommodation with additional comprehensive facilities has been pursued.

V. FAMILY CASE WORK SERVICE.

Unlike colleagues in other, more specialised, agencies like the Probation Service, social workers in a Health and Welfare Department tend to receive a wide range of referrals which do not fit into the neat pigeon holes provided by legislation. This poses a problem in terms of arranging priorities, not only to the individual workers, but also to the administration. Inevitably it is the case which presents a crisis situation to the Welfare services which is likely to receive maximum attention at any one time. The family homeless or threatened with homelessness, unlike the elderly person no longer capable of self-care, is not necessarily so likely to receive general sympathy since many families are rendered homeless through their failure to pay rent, and, therefore, the crises could be construed as self-induced.

In September a joint Ministry Circular was issued to local authorities on the subject of homeless families—Temporary Accommodation. Unfortunately the guidance given in this Circular has not received unanimous acceptance from the district housing authorities in the county and it is sad to note that, at the end of the year we still have, in temporary accommodation, two families who were evicted, by district council, in July, 1966. This is a discouraging experience not only for the families themselves but also for the social workers who endeavour to support and encourage the families.

Duties in Relation to Section I of the Children and Young Persons Act, 1963.

The duty of local authorities under Section I of the Act is to make available advice, guidance and assistance so as to promote the welfare of children by diminishing the need to receive them into care, and to provide a casework service. The Act empowers the local authority to provide financial and material assistance to families in an effort to prevent the break up of a family. Authority has been given to spend up to £25 in an emergency on any particular family in need, additional expenditure being subject to prior approval of the Chairman of the Health Committee. In this way assistance was given on 21 occasions during the year and it was found, as in previous years, that bedding was the most common need. Assistance was given to 54 families in the form of furniture which had been given by private persons, or which was of no further use to the County Council. In addition officers obtained financial assistance from other sources in 93 cases and material assistance in 657 cases. The Women's Royal Voluntary Service and the Ministry of Social Security had been most co-operative and helpful throughout and this continues to demonstrate the goodwill of agencies engaged in preventive work.

Statistical returns for the year ended 31st December, 1967, show that 5,320 families were notified to officers of the Health Department as being in need of advice or assistance, a decrease of 4.7% over the year ended 31st December, 1966. Since this work was undertaken in 1964 there has been a gradual decrease in the numbers of families notified yearly following the initial period of almost saturation notification. The system of early warning notification of families likely to breakdown continues, as in the past, to work excellently due to the full co-operation of housing managers and health visitors, as well as the officers attending the family case conferences.

The total case load of families under supervision by officers of the Health Department on the 31st December was 1,126. Not all of these families were necessarily on the verge of break up, but all were considered to be in danger of developing more serious problems if there was no form of supervision. Intensive casework is undertaken with families in their own homes, where prior to the 1st April, 1964, when the Act was implemented, it may have been necessary to remove children because of lack of resources or workers to bring about improvements in home circumstances.

The duty of co-ordinating social work carried out by statutory and voluntary agencies with problem families has continued and is no less demanding than at the outset. To provide an effective service close liaison has been maintained with the various agencies involved by continuing with the arrangement of holding area family case conferences throughout the Administrative County area. The conferences have been held under the chairmanship of the Assistant County Medical Officers. It is worth repeating that in establishing the conferences it was envisaged that they would serve a dual function of bringing to the notice of the various agencies, problem families or families experiencing difficulties and in danger of breaking up. Secondly the conferences would afford field workers the opportunity of becoming acquainted and, therefore, improving liaison at field level thus consolidating relationships and understanding the difficulties involved in this demanding work. In the light of experience it would appear the objectives had been achieved and that preventive and rehabilitative work with problem families is now firmly established. There has been an increasing demand for case conferences on individual problem families and these are proving to be very successful in diagnosing problems within families and at a later stage bringing about dynamic changes.

VI. TEMPORARY ACCOMMODATION (NATIONAL ASSISTANCE ACT, 1948—SECTION 21 (1)(b)).

(a) Present Position.

The use of the Cottage Homes at Houghton-le-Spring for families requiring temporary accommodation continued and during the year five families were admitted.

Thirty-three families were provided with emergency accommodation at Lambton House, Birtley, the length of stay varying from one to 44 days. From this unit three families were transferred to temporary accommodation at Houghton-le-Spring. 27 were found alternative accommodation and three were transferred to the Rehabilitation Unit at Lambton Grove.

At the end of the year the number of persons in the three units was as follows:—

Name of Unit.	Adults	Children	Total
Cottage Homes, Houghton-le-Spring	5	15	20
Lambton House, Birtley	1	3	4
Lambton Grove, Birtley	7	18	25
Total	13	36	49

This compares with 16 adults and 38 children at the end of 1966.

(b) *Future Developments.*

The Cottage Homes at Houghton-le-Spring were to be demolished early in 1968 to enable road improvements to be carried out and the possibility of adapting premises in current use as residential accommodation to provide temporary accommodation for homeless families was under investigation at the end of the year.

VII. HOSTEL ACCOMMODATION FOR THOSE NEEDING CARE AND ATTENTION (NATIONAL ASSISTANCE ACT 1948, SECTION 21).

(a) *Present Position.*

At the end of the year there were 29 residential homes providing 1,197 places. Of these three were former Public Assistance Institutions, eight adapted premises and 18 purpose-built (one, Palatine House, Durham, being for blind and partially sighted persons). Two of the purpose-built hostels include a special wing for more infirm residents.

Furnishing was in progress at Lanchester Hostel and hostels were under construction at Houghton-le-Spring, Brandon, Fishburn, Burnopfield, Leadgate and Durham. Arrangements were in hand to commence the building of further hostels at Fence Houses, Spennymoor, Hetton-le-Hole and Washington.

Premises on the sea front at Roker, Sunderland, have been acquired and these will be adapted to provide short-stay accommodation for 15 residents.

233 residents were provided with short-stay accommodation in the holiday home at Seaton Carew. These included 37 residents of other hostels in the County and five residents accepted direct from hospital. There were 13 persons resident in this unit on the 31st December, 1967.

The 1,251 places provided directly, together with 76 beds occupied in transferred hospital accommodation, represents an increase of 12 in the number of places available compared with 1,315 at the end of 1966. The places available were distributed as follows:—

*Residential
Accommodation
beds provided.*

*Residential
Accommodation
beds provided.*

In Homes controlled by the Welfare Sub-Committee:—

Former Public Assistance Institutions

Cambridge House, Barnard Castle	67
Heath House, Houghton-le-Spring	96
Ivy House, Sedgefield	76

Adapted Premises.

Seaton Holme, Easington	35
Weardale House, Stanhope ...	59
Newtown House, Stanhope ...	30
The Hermitage, Whickham ...	18
Grove Park, Barnard Castle ...	22
Owton Fens, Greatham	21
Holmfield, Crook	30
Glencliffe, Seaton Carew	37

Purpose Built Hostels.

Parkside, Billingham	38
Winton House, Winlaton	38
Essyn House, Easington	40
Dene House, Bishop Auckland ...	38
Shafto House, Newton Aycliffe ...	45

In Hospitals transferred to the Regional Hospital Board on 5th July, 1948.

Purpose Built Hostels (contd.)

St. Bede's House, Jarrow	38
Stanfield House, Stanley	38
Glenroyd House, Consett ...	38
Mendip House, Chester-le-Street ...	38
Boldon House, East Boldon ...	45
Redhill House, Stockton	45
Kepier House, Durham	45
Millbank House, Seaham	38
Derwentdale House, Ryton ...	45
Wellburn House, Stockton ...	45

Purpose Built Hostel including frail/ambulant wing.

Shadon House, Birtley	44
Campbell Park House, Hebburn ...	45

Home for the Blind and Partially Sighted.

Palatine House, Durham	38
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Holiday and Short Stay Home.

Glencliffe Holiday Home, Seaton Carew	19
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Durham	20
Lanchester	56

In Homes controlled by:—

(a) Neighbouring County Borough Councils.

Darlington	6
Gateshead	8
South Shields	3
Sunderland	1

(b) Other Local Authorities

17

In Special Homes

19

Total	1,381
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The number of employees in the 29 premises directly controlled by the Health Committee was as follows:—

Superintendents	...	...	...	...	4
Matrons	...	...	...	...	25
Wardens	...	...	...	...	2
Other staff	...	...	...	...	432

The number of cases on the waiting list on the 31st December was 610 compared with 530 in 1966.

Maintenance Charges.

During the year the minimum charge was increased from £3. 6s. 0d. to £3. 12s. 0d. and the standard charge in two stages from £8. 11s. 6d. to £10. 4s. 9d., no change having been made in 1966.

X-ray examinations.

There is a relatively higher incidence of tuberculosis in the older age groups, and in order to detect any case which might benefit by treatment, and also to protect residents from possible infectious cases efforts are constantly made to ensure that all aged persons admitted to residential homes have their chests x-rayed before admission.

(b) Future requirements.

The amount of residential accommodation required for the elderly and others "in need of care and attention" is affected by the housing conditions ; the existence of warden services ; the degree of support forthcoming from families and neighbours and by the amount of residential accommodation provided privately and by voluntary organisations otherwise than as agents of the local authorities.

Hostels in course of erection and those on which building will commence in 1968 will provide 495 places, while the use of 76 beds in transferred hospitals and 96 in the former Public Assistance Institution at Houghton-le-Spring, will be discontinued. To meet anticipated requirements and close the former Public Assistance Institution at Barnard Castle by 1976, a further 1,400 places will be necessary and every effort is being made to secure continuation of the present rate of development.

SECTION E—INSPECTION AND SUPERVISION OF FOOD AND DRUGS

1. MILK (SPECIAL DESIGNATION) REGULATIONS, 1963.

At the end of the year there were four plants processing milk in the administrative county, all of which were authorised to use the special designation " Pasteurised " while one dairy holds an additional licence for the sterilising of milk. All plants are of modern design. Pasteurising units operate on the H.T.S.T. System and the sterilising plant includes Danks Tanks. The total quantity of milk treated is approximately 49,000 gallons per day. Regular inspections of these dairies are made and satisfactory standards maintained.

Three dairies have washing, filling and capping lines with automatic decrating, recrating and stacking. This line operates at a rate of up to 280 bottles per minute, and while satisfactory, such a rate is indicative of the practical difficulty of 'spotting' unsatisfactory bottles which have been returned to the dairy in such a condition as to be incapable of being satisfactorily cleansed by the washer.

Misuse of bottles continues, and the number of complaints of unsatisfactory bottles being delivered to consumers is generally the same as in previous years. Daily the dairies licensed by this council wash and fill some 464,000 bottles. With modern washing and filling equipment, these numbers present no difficulty, provided that empty bottles have been rinsed immediately after use, returned promptly and not used for any purpose other than as milk containers. The co-operation of housewives, school teachers, canteen supervisors, and others similarly engaged in ensuring that this is done, would be most helpful to the dairy staff and be beneficial to the consumer.

Although the County is a specified area in which only milk of a special designation can be sold, exception is made as a last resort. Where no such supplies are available the Ministry of Agriculture and Fisheries issue a " Consent " licence enabling a retailer to dispense with the requirements of the order. During the year eight such consents were in operation. The amount of milk covered by these consents is very small and only serves the needs of people living in isolated houses.

Routine samples continue to be taken by County Health Department staff of milk delivered to schools and children's homes. Five samples failed the methylene blue reduction test (keeping quality). On investigating the reason for the failures it was considered that a contributory factor was the arrangements for delivery and storage at the schools and appropriate recommendations were made. Fourteen complaints have been received concerning the condition of bottles of milk delivered to schools. In six cases prosecutions were instituted and were successful, and in the remaining cases appropriate advice was given. Five of the cases considered suitable for prosecution were of glass in the milk, and in this respect the supply of milk in cartons would be welcome.

At the request of the Durham Hospital Management Committee, routine samples are taken of milk delivered to hospitals in their group.

Under the above regulations the County Council as the Food and Drugs Authority has the duty of licensing and supervising all dealers in milk, the number licensed being as follows :—

No. of current licences at 1.1.67	(i) 'B' Licences	...	...	...	7
	(ii) 'E' Licences	...	...	...	1,807
No. issued during the year	(i) 'B' Licences	...	...	...	1
	(ii) 'E' Licences	...	...	...	125
No. cancelled during the year	(i) 'B' Licences	...	...	...	Nil
	(ii) 'E' Licences	...	...	...	197

No. of current licences at end of year 1,743.

Details of the results of all examinations of samples of milk are given in Table 25, Part III.

To ensure that the arrangements for handling and storing milk are maintained at a satisfactory level, some 422 inspections of premises have been made. These have resulted in the provision of 23 new and improved premises, and a further eight cold storage units have been installed. A total of 63 cold storage units are now in operation. These units can be grouped in a purpose built store providing separate accommodation for up to nine dealers, can be sited so that inconvenience due to noise is minimal and enables deliveries by the dairies to be carried out during normal working hours, so eliminating deliveries during the night.

During the year the Milk Marketing Board commenced a scheme of milk collection from farms by tanker as an alternative to churn collection. Previously all collection has been in churns but sufficient farmers were interested to enable the tanker system to be introduced. The principle is that milk at the farms is stored in refrigerated tanks from which it is pumped into a refrigerated road tanker for delivery to the processing dairy. This system is becoming more popular each year and at two processing dairies in the County no ex-farm churn milk is received.

The policy of relating routine sampling to the quantity of milk sold by the various dealers has continued, to avoid as far as possible duplication, but at the same time to spread the work over the areas of the various county districts. Each local authority is furnished with a monthly report of all samples taken within its area. 4,307 samples have been taken.

The one sample that failed the phosphatase test was an isolated case, and an investigation gave no indication of the cause of the failure. Where a sample failed the methylene blue test, an investigation was made, appropriate advice given and a repeat sample taken. If a repeat sample of untreated milk from a producer-retailer failed the test the Divisional Milk Officer of the Ministry of Agriculture, Fisheries and Food was informed. In this respect, attendance at the Milk Sub-Committee of the Ministry of Agriculture, Fisheries and Food is helpful, in that information is readily exchanged of producer/retailers being supervised, possible causes of failures and the action proposed. At the end of the year there were 160 producer/retailers in the County.

Sampling of untreated milk for antibiotics has continued in keeping with previous procedure of concentrating on untreated milk on retail sale. 1173 samples of untreated milk have been submitted to the Public Health Laboratories for antibiotic examination, seven of which contained antibiotics in excess of the accepted figure. Appropriate action was taken in each case.

2. FOOD AND DRUGS ACT, 1955. SECTION 31.

Samples of untreated milk are being obtained and submitted to the Public Health Laboratories for biological examination for the presence of tubercle bacilli which can cause tuberculosis, and brucella abortus which can cause contagious abortion among cattle and undulant fever in man. The results of 382 samples have been received and are shown in Table 25. The 11 positive results refer to samples of untreated milk which on examination showed brucella abortus to be present. They represent nine cases and were obtained from seven producer/retailers. In all cases the positive results were obtained from guinea pig inoculation, generally from samples taken at least eight weeks previously, and because of the herd history and in particular the movement of the animals into or out of the herd concerned during this time, it was agreed with officials of the Health Department of the local authorities concerned and the producer, that herd testing be carried out immediately in co-operation with the producers veterinary officer. This resulted in positive and suspicious animals being withdrawn from the herd as speedily as possible, when routine testing continued.

Brucellosis

Consideration was given to Circular 17/66 dated November, 1966, on Brucellosis from the Ministry of Health which is intended to give guidance to local authorities in the interpretation of the provisions of the Milk and Dairies Regulations, with regard to the infection of milk. Subsequently to ensure that adequate routine sampling of untreated milk is carried out in the Administrative County without unnecessary duplication, a meeting of Chief Public Health Inspectors of all Authorities in the geographical County was arranged in County Hall. The County Health Inspector gave details of the present and proposed routine sampling by this Authority, and after a general discussion, this was accepted as being adequate. The general principle is that untreated milk from producer/retailers is sampled monthly for ring and culture examination, and every fourth month guinea pig inoculation is carried out. This procedure accounts for the increase in samples taken from 761 last year to 1,242. There was some limitation on the number of samples taken during November and December because of the restrictions of movement on farms due to the outbreak of foot and mouth disease in the Midlands.

Early in the year details of the Brucellosis (Accredited Herds) Scheme were published by the Ministry of Agriculture, Fisheries and Food. This provides in the first instance for the establishment of a register of accredited herds as the first stage in the eradication of brucellosis. Applicants for registration are required to comply with rules on isolation, movement, vaccination and the keeping of records, etc. and herd tests over a stated period of time must be satisfied. At a certain stage animals failing the official test will be

slaughtered and compensation paid. The scheme is at present voluntary and the interest in it apparently varies from area to area, but it is much too early even to hazard a guess as to the degree of general acceptance. Obviously it will take some years to become effective and meanwhile the sampling of untreated milk by the County Council for biological examination is as important as previously. The only safe supply immediately available is heat treated milk. It may be difficult or impracticable, to supply heat treated milk to all areas of the Country, but where this is so, untreated milk could be made available in "Consent" licences, similar to those at present issued by the Minister in respect of non-designated milk. This would mean that the present practice of large quantities of untreated milk being sold in many areas, alongside processed milk, would cease and sampling by Health Authorities could then be concentrated on the reduced number of suppliers of untreated milk in sparsely populated areas.

The Chief Inspector of Weights and Measures reported that 7 samples of milk from 7 suppliers were found to be either deficient in milk fat or showed evidence of added water. It was decided that two cases were suitable to take before the Justices, three cases were referred to the National Agricultural Advisory Service, one offender received a warning letter, and in the remaining case a follow up sample proved satisfactory.

FOOD AND DRUGS ACT

The following statement shows the results of examinations carried out by the County Analyst during the year :—

	<i>No. of samples.</i>	<i>No. adulterated.</i>	<i>% adulterated.</i>
Milk 1,075	16	1.5	
Other foods and drugs 2,641	130	4.9	
	3,716	146	3.9
Appeal to cow samples 		17	
Milk below presumptive standard but genuine 		69	

SECTION F—ENVIRONMENTAL HYGIENE

I. (a) *Bacteriological Laboratory Facilities.*

The Medical Research Council, acting on behalf of the Ministry of Health, continues to be responsible for the administration of the public health laboratory service.

The laboratories situated at the General Hospital, Newcastle upon Tyne, Havelock Hospital, Sunderland, General Hospital, Middlesbrough and the Friarage Hospital, Northallerton, undertake examinations for the administrative county area.

(b) *Water Supplies.*

Piped water is supplied to the various parts of the administrative county area by the following water undertakers :—

Tees Valley & Cleveland Water Company.

Durham County Water Board.

Sunderland and South Shields Water Company.

Newcastle and Gateshead Water Company.

Hartlepools Water Company.

Only small rural areas rely on local wells or springs.

Normal extensions of mains to housing estates and industry continue in all areas while work also proceeds in improving service reservoirs, treatment plants, etc.

The increased demand for water both for domestic and industrial use in the area continues, particularly on Teesside, and work has commenced on the construction of the Cow Green Reservoir in Upper Teesdale for the Tees Valley and Cleveland Water Board. As mentioned in my last report there has been a great deal of opposition to the Board's proposal to construct a new weir and pumping station at Croft to allow further extraction from the River Tees, and this scheme has now been abandoned. The possible alternative would now seem to be for additional extraction at Low Worsall and Broken Scaur to take place.

Copies of results of analysis of water samples taken by local authorities are sent to the county health department and, where necessary, further investigations are carried out. Of 709 samples taken, 86 were classed as unsatisfactory. These unsatisfactory samples were generally from individual spring or well supplies to isolated farms or dwellings and in a number of instances were repeat samples of those reported in previous years. Routine samples of supplies to schools, kitchens, dairies and similar establishments continue to be taken by officers of the department and have proved generally satisfactory. Where adverse reports were received they came from local supplies subject to variation in quality and quantity due to extreme weather changes. Towards the end of the year a circular letter from the Ministry of Health drew attention to the possibility of lead being in drinking water. In this respect it was known that water supplied by the water undertakers from their main supplies, had the p.H. value adjusted to prevent plumbo-solvency, It was felt, however, that some supplies from local sources which also supply schools should be investigated to obtain up to date information on the position, and this is being done.

Schemes providing improved or new water supplies to certain areas have been submitted for consideration. Investigations have been carried out in each case and appropriate recommendations made.

Fluoridation of Water Supplies.

The population living in the Hartlepool area have been drinking water containing a fairly high natural concentration of fluoride for a great number of years and the benefits of fluoride are now being extended to other parts of the county.

The agreement in principle of neighbouring authorities to fluoridation has enabled progress to be made and three of the Water Companies serving parts of the administrative county are now preparing to add fluoride to the water supplies to raise the content to one part per million, a level which already exists naturally in some parts of the area.

II. (a) *Rural Water Supplies and Sewerage Acts, 1944-61.*

During the year the County Council continued to make grants towards the cost of approved schemes for the provision of piped water supplies and main drainage in the rural areas of the County.

In connection with Section 2(1) of the above Acts, a number of schemes were under consideration, the following receiving contributions during the year :—

	<i>Estimated Cost.</i> £
(a) Weardale Rural District—Western Area Joint Sewerage and Sewage Disposal Scheme	70,000
(b) Barnard Castle Rural District—Bolam Sewage Disposal Works	10,418
(c) Lanchester Rural District—Redhouses Water Main	3,300

(b) *Drainage, Sewerage and Sewage Disposal.*

Routine inspections of existing disposal works and those under construction continue to be made. A number of schemes to replace overloaded and defective works and to enable the continued development of housing and industrial estates have been submitted by local authorities for consideration. Investigations have been carried out in each case and appropriate recommendations made.

Tyneside Sewage Disposal—As was to be expected, the Joint Sewage Board which came into being in October, 1966, spent its first year in establishing itself, assessing the present position and formulating future policy, and it is now anticipated that work on certain stages of the major scheme will commence in the near future.

Teeside Sewage Disposal—The consultants engaged by the Joint Consultative Committee are continuing their investigation into the degree and type of pollution in the area and their report is awaited.

County Council Properties—As requested by the County Architect routine inspections of sewage disposal works, sampling of effluents and submission of appropriate recommendations of properties not on main drainage have continued.

(c) *Local Government Act, 1958.*

A number of applications for grant aid under Section 56 have been received from local authorities in respect of sewerage and sewage disposal schemes and the following received initial contributions during the year :—

	<i>Estimated Cost.</i> £
(a) Durham Rural District—Bearpark Sewage Disposal Scheme	45,520
(b) Durham Rural District—Belmont Sewerage and Sewage Disposal Scheme	110,383
(c) Durham Rural District—Kimblesworth Sewerage and Sewage Disposal Scheme	29,000
(d) Houghton-le-Spring Urban District—Penshaw Main Drainage	61,770
(e) Brandon & Byshottles Urban District—Esh Winning Sewerage & Sewage Disposal Scheme	179,800

III. HOUSING.

A statement as to the position of housing in the Administrative County, compiled from information supplied by district councils, is given in Table 26—Part III.

IV. CLOSET ACCOMMODATION.

Table 27—Part III gives the number and type of convenience in each sanitary district at the end of 1966 together with information as to the conversions of ashpit privies and ash-closets into water-closets during the year.

V. SCHOOL SWIMMING POOLS.

At the request of the Director of Education responsibility has been accepted for the inspection of all swimming pools provided by the County Council, with the exception of that at Acre Rigg, Peterlee, which is in the excepted district of Easington, and the necessary routine sampling. Initially the nine pools then in use were inspected by the County Health Inspector and a report with recommendations for improving their use and the facilities provided, was submitted to the Director of Education. By the end of the year many of the recommendations had been implemented.

These pools which were designed by the County Architect, included six learner pools attached to junior mixed schools, and three attached to grammar schools. All pools are equipped with continuous flow circulation systems with automatic filtration and chlorination of the water, and in all cases the water is heated. The pools at grammar schools serve an older age group of swimmers and being used in conjunction with gymnasias and playing fields are larger and provide accommodation of a higher standard than the learner pools. This includes the treatment units, and whereas chlorine is used for sterilising in all cases, in learner pools a stabilised brand of hypochlorite giving approximately 15% available chlorine by weight is used, but at pools at grammar schools a more sophisticated treatment unit is installed using liquid chlorine contained under pressure in cylinders and attached to an automatic dosing unit.

During the year a further two learner pools have been completed and one learner pool and one pool attached to a grammar school are under construction, to the County Architect's design. Recommendations made subsequent to the initial inspection have been included in new pools.

Arrangements have been made for a further twelve learner pools in the form of a package deal to be provided. Three of these pools are at present under construction, the specification for which has been amended in the light of past experience, e.g. diatomaceous earth filters have been replaced by sand filters, but not to the extent of affecting delivery dates.

Subsequent to the initial inspection, the County Health Inspector arranged for regular visits to all pools to check on the efficiency of treatment. This includes testing the water for p.H. value and residual chlorine. At least monthly and more often if necessary, samples are also taken for bacteriological examination. It is pleasing to note that results over the year have shown a marked improvement.

<i>Quarter Ending.</i>	<i>Number of Visits.</i>	<i>Samples for Bacteriological examination.</i>	<i>Satisfactory.</i>	<i>Unsatisfactory.</i>
March	74	57	46	11
June	68	51	45	6
September	36	36	33	3
December	76	29	29	—
Totals	254	173	153	20

The major contributory factor to this improvement has been the time spent by the County Health Inspector in explaining the operation of the plant, the methods of treatment and the interpretation of daily test results to the caretakers. When new pools are handed over additional time is spent with the caretakers, who rarely have any knowledge of pools operation, and this also applies at existing pools where staff changes occur. This interest and assistance has been well received and greatly appreciated by headmasters, caretakers and instructors alike, although it has increased the work of the section, with some inconvenience to the Inspectors, as breakdowns in treatment etc. are generally in the form of emergencies requiring immediate action, often after school hours, to keep the pools in operation.

SECTION G. GENERAL

I. NURSING HOMES.

During the year no application was made to the County Council under Section 194 of the Public Health Act, 1936, for the delegation of their powers to district councils. The following nursing homes registered by the County Council were periodically inspected :—

<i>Name and Address.</i>	<i>Description.</i>
Percy House, Neville's Cross, Durham 	Aged, infirm and border-line mental cases.
St. Cuthbert's Hospital, Rockliffe Park, Hurworth-on-Tees, (annexe to Hospital of St. John of God, Scorton).	Chronic sick (males).
" Milford," North End, Durham 	Aged and infirm.
" Wayside", West Boldon 	Aged teachers and their dependants

II. NURSERIES AND CHILD MINDERS' REGULATION ACT, 1948.

During the year 22 premises were registered as nurseries and four persons were registered as daily minders. Two nurseries and four daily minders had their registrations cancelled bringing the total registrations at the end of the year to 43 nurseries and 14 child minders.

When a request is received for registration of a nursery, a list of requirements based on Ministry of Health standards for local authorities day nurseries, is forwarded and the building is inspected by a senior medical officer. Only when all conditions are satisfied is the registration recommended to the Health Committee.

Nurseries and child minders are visited regularly by a senior medical officer and health visitors to ensure that satisfactory standards of health and hygiene are maintained. During the year there was no case in which a nursery failed to maintain these standards.

Before any person commences work in a private day nursery or as a child minder, a satisfactory Chest X-ray report must be produced, and repeat X-ray examinations are now being requested at 3 yearly intervals. In cases where members of the minder's family are likely to come into contact with the children, similar reports are also required from them in accordance with the Ministry of Health Circular 18/67.

III. TEES-SIDE (MIDDLETON) AIRPORT.

The County Council assumed responsibility for the health control at the Tees-side (Middleton) Airport early in 1965. Arrangements continued for medical cover at the airport in co-operation with three local general practitioners. These doctors have agreed to act as medical inspectors under the Commonwealth Immigrants Act, 1962, and the Aliens Order, 1953, and they have been officially appointed by the Home Office. In addition, three senior members of my staff and myself have been appointed as medical inspectors.

With regard to the Public Health Airport Regulations, arrangements are made for one senior member of my medical staff to be available either in the office or at home at all times.

During 1967, 60 Commonwealth citizens subject to control under the Commonwealth Immigrants Act, 1962 arrived at the airport in addition to 59 aircraft carrying 687 aliens.

PART II

SCHOOL HEALTH SERVICE

ADMINISTRATION

During the year, the Management Services Unit reviewed certain sections of the Health Department including the School Health Service. An interim report was published during the year and several changes were recommended. Amongst the various recommendations was a complete revision of the procedure for selecting children for school medical inspections, the streamlining of clerical work, the revision of filing arrangements and the possible use of the computer for certain records and compilation of returns. The final report is expected to be presented to the appropriate Committee during 1968 and the recommendations implemented forthwith.

PREMISES

In November a new combined school clinic and maternity and child welfare centre was opened in Seaham. This clinic replaces two school clinics and a maternity and child welfare centre in the area.

GENERAL STATISTICS

The numbers given throughout the report relate to the Administrative County Area excluding the excepted district of Easington and the Borough of Stockton. Statistics relating to Easington and Stockton-on-Tees appear in the reports of Dr. Rodgers and Dr. Peters respectively, on pages 120 and 132.

SCHOOLS AND SCHOOL CHILDREN

Type of School.	No.	No. on Rolls, January, 1968.
Nursery Class part-time	—	18
Nursery	16	666 (full-time) 89 (part-time)
Primary	421	81,394
Secondary Modern	92	33,817
Secondary Grammar/Grammar-Technical	20	14,718
Special Schools :		
Day Schools for Educationally Sub-normal	6	572
Residential Schools for Educationally Sub-normal	3	
Residential Schools for Delicate pupils	1	
Residential Schools for Maladjusted boys	1	
	—	5
	560	309
(There is also a Residential Hostel for 15 maladjusted boys).	—	131,583

EFFECT OF BOUNDARY CHANGES

On the 1st April, 1967, the Borough of Hartlepool together with a small proportion of the Stockton Rural District, amalgamated with the County Borough of West Hartlepool to form Hartlepool County Borough. On the same date the greater part of Sunderland Rural District was absorbed by Sunderland County Borough. The school clinic, Frederic Street, Hartlepool, was taken over by the County Borough and several schools were affected by the boundary changes. The following table gives details of the schools and children affected.

<i>(a) Transferred to Hartlepool County Borough.</i>							<i>No.</i>	<i>No. of Children.</i>
<i>Type of School</i>								
Nursery	...	...	...	...	...	...	2	80
Primary	...	...	...	...	...	...	10	2,113
Secondary Modern	...	...	...	...	...	...	4	1,125
Secondary Grammar/Grammar Technical	...	...	...	...	...	...	1	552
							—	—
							17	3,870
							—	—

<i>(b) Transferred to Sunderland County Borough</i>							<i>No.</i>	<i>No. of Children.</i>
<i>Type of School</i>								
Primary	...	...	...	...	...	...	13	3,456
Secondary Modern	...	...	...	...	...	...	4	1,245
Secondary Grammar/Grammar Technical	...	...	...	...	...	...	1	684
							—	—
							18	5,385
							—	—

SPECIAL SCHOOLS

The number of pupils attending the County Special Schools in January, 1968, was as follows :—

(a) For Educationally Sub-Normal Children :—

Billingham Day School	...	...	...	...	...	...	...	117
Bishop Auckland Day School	...	...	...	...	...	...	...	76
Durham Day School	...	...	...	...	...	...	...	114
Felling Day School	...	...	...	...	...	...	...	106
Hare Law Day School	...	...	...	...	...	...	...	98
Spennymoor Whitworth House Day School	...	...	...	...	...	...	...	61
Dinsdale Park Residential School	...	...	...	...	...	...	...	75
Elemore Hall Residential School	...	...	...	...	...	...	...	64
Walworth Castle Residential School	42

(b) For Delicate Children :—

Windlestone Hall Residential School	89
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(c) For Maladjusted Children :—

Redworth Hall Residential School	39
Total							...	881

INFECTIOUS DISEASES

The following figures show the number of cases notified to this department.

<i>Scarlet Fever.</i>	<i>Dysentery.</i>	<i>Measles.</i>	<i>Infective Hepatitis.</i>	<i>Poliomyelitis.</i>
146(171)	129(48)	1,955(1,535)	92(54)	None (None)

(Figures given in brackets refer to 1966).

It is gratifying to note that no case of poliomyelitis has been reported during the past six years.

SCHOOL HYGIENE AND SANITATION

Alterations continue to take place in the older type of schools to bring them into line with the Standards for School Premises Regulations and a number of schools had hot water installed during the year. Several schools were provided with indoor sanitation during the year. It has, up to now, been the normal practice to include one school from each Education Division in the Minor Capital Works Programme for the provision of indoor sanitation. The Education Committee have, however, decided that in future years two schools from each Division should be included.

Satisfactory accommodation is provided in most new schools for the inspection of pupils by doctors, dentists and nurses, but this is lacking in some of the older schools, and in these schools head teachers' rooms or staff-rooms are used. In some cases, it is necessary to hire other premises for this purpose. Approval has now been given for the purchase of a mobile medical inspection caravan, which should overcome most of these difficulties.

The provision of individual towels in separate containers is continuing, although this system is being reviewed. Wherever an outbreak of dysentery or other similar disease is suspected, paper towels, which can be burnt, are used.

1. New schools opened during 1967:—

(a) County Primary Schools—	...	...	...	...	...	...	12
(b) County Secondary Schools	...	...	...	...	...	...	3

2. Number of existing schools with hot water supply installed during 1967:—

(a) Completed	...	...	...	...	...	...	14
(b) In hand but not completed by 31.12.67	...	...	...	...	...	...	1

3. Number of existing schools provided with indoor sanitation during 1967:—

(a) Completed	...	...	...	...	...	...	13
(b) In hand but not completed by 31.12.67	...	...	...	...	...	...	14

MEDICAL INSPECTIONS

Routine medical inspection is still being carried out in three groups :—

School Entrants.

Ten Plus Age Group.

School Leavers.

It will be noted from the figures given below that the total of routine medical inspections for 1967 is 3,741 less than for 1966 and the number of special inspections less by 708.

Year	Routine Medical Inspection.	Special Inspection.
1964	...	25,757
1965	...	9,385
1966	...	32,318
1967	...	8,039
1964	...	32,174
1965	...	8,803
1966	...	28,433
1967	...	8,095

The main reason for the reduction in the total numbers of children medically examined was the shortage of medical staff. During 1967, two full time medical officers resigned and although one full-time and two temporary part-time officers were appointed, there were at the end of the year, the equivalent of six full-time vacancies for doctors in the School Health Service. As a result of this, there were in December, an estimated 12,000 children overdue for routine medical examinations.

Full details of medical inspections and treatments are given in Table 28 Part III.

Physical Condition

The figures given below are derived from the individual assessments of all the school medical officers and as there are no fixed standards some deviation of opinion is inevitable. Nevertheless I feel that reliable conclusions can be drawn from this information, and it is pleasing to record that the percentage found "unsatisfactory" remains below 1%.

CLASSIFICATION OF PUPILS INSPECTED AT PERIODIC MEDICAL INSPECTIONS, 1964-67.

Year.	Number of Children Inspected.	Satisfactory.		Unsatisfactory.	
		Number.	Percentage.	Number.	Percentage.
1964	25,757	25,181	97.8	576	2.2
1965	32,318	32,043	99.15	275	.85
1966	32,174	31,898	99.14	276	.86
1967	28,433	28,210	99.22	223	.78

Medical Inspection at Training Centres for the Mentally Subnormal.

School medical officers paid a total of 18 visits to carry out medical inspections of mentally sub-normal persons attending the training centres at Bishop Auckland, Chester-le-Street, Consett, Durham, Hebburn, Newbottle and Lanchester.

These children and adolescents have been found to be "unsuitable for education at schools" and were certified to be so by school medical officers who knew them and examined them as school children or potential school entrants. The existing arrangement by which medical officers continue to medically examine these children and adolescents, and also visit the training centres, provides a very desirable continuity of contact, and at the same time allows the doctor to be aware of the facilities available at the centre.

MEDICAL AND CONVALESCENT TREATMENT

A full list of school clinics, speech clinics and child guidance clinics showing details of services available and the day of attendance of staff is given in Table 29 and an analysis of cases examined and treated in school clinics is given in Table 30.

Ultra Violet Ray Treatment.

Ultra Violet Ray sessions are still being held at a number of clinics once or twice weekly, the nurse giving treatment at the direction of the school medical officer. Although the value of this form of therapy is not regarded as highly as in the past, some school medical officers believe there are cases where the children do benefit. At the request of consultant skin specialists some children suffering from certain skin conditions also receive treatment.

One hundred and two (102) pupils, referred by school medical officers, hospitals and medical practitioners, attended for sun-ray treatment, a total of 1,384 attendances being made.

Skin Diseases.

A total of 794 children received treatment during 1967 compared with 764 cases in 1966.

Defective Vision.

A total of 14,201 children were examined in the County for refractive errors compared with 12,173 in 1966. 3,255 of these were examined by the school oculists.

Spectacles were prescribed for 10,446 children and were supplied by opticians through the Supplementary Ophthalmic Service.

Diseases and Defects of Ear, Nose and Throat.

The number of school children who required treatment was 1,245 and of that number, 980 received operative treatment. In the previous year 1,301 required treatment, 986 receiving operative treatment.

Hearing Aids.

Progress reports are received from head teachers on children in ordinary schools who have hearing aids. These children are also seen periodically by school medical officers. This ensures that any apparent worsening of the condition can be investigated. Sixteen pupils were issued with hearing aids through the National Health Service making a total of 147 children with these aids at the end of 1967.

Where children, because of the nature of their deafness, required special hearing aids, these were provided by the Committee and during the year eight were supplied.

Orthopaedic and Postural Defects.

Two hundred and sixty-five children received treatment in hospitals or at their out-patient clinics. Information received about these children is forwarded to the School Health Service and is passed to the general medical practitioners.

Convalescent Treatment.

No arrangements were made during 1967 for children to have periods of convalescence at convalescent homes.

SPECIAL INVESTIGATIONS AND VACCINATION AND IMMUNISATION OF SCHOOL CHILDREN AT SCHOOL

(a) Tuberculin Testing of School Entrants.

To make the school medical examination of children entering school even more complete and comprehensive the scheme commenced in September, 1963, to tuberculin test school entrants to indicate if they had been in contact with a case of tuberculosis, was continued during 1967. The tuberculin skin testing is carried out by the health visiting staff one week prior to the scheduled medical examination and the result of the test is read by the school medical officer at the medical examination. Those children found to be skin test positive are referred to the Chest Physician for examination.

Table 31 shows details of the scheme for 1967. Of the 100 children found to be tuberculin positive (1.3% of the 7,729 children tested) the majority had overcome the infection. One child was notified as a new case of tuberculosis.

(b) Vaccination against Poliomyelitis.

Arrangements made in previous years were continued, when school children, with the consent of their parents, were given immunising doses of oral vaccine by health visitors under the supervision of medical staff. The number of primary courses given was 1,473 and of reinforcing doses 4,402. It is encouraging to note that there were no cases of poliomyelitis confirmed in 1967.

(c) Immunisation against Diphtheria and Tetanus.

During 1967 there was a fall in the numbers of school children receiving primary injections against diphtheria and tetanus, although the numbers were greater than in 1965. The actual numbers were:—

		1967	1966	1965
Primary Injections	...	1,808	3,048	1,713
Reinforcing Injections	...	3,419	3,543	1,566

The number of children who had already received a primary course of immunisation against diphtheria alone and who were given a reinforcing injection at school was 303 as compared with 3,071 in 1966. This is accounted for by the fact that the majority of the children due for reinforcing injections had originally received a combined injection against diphtheria and tetanus and therefore, were given reinforcing injections of this combined vaccine. Their numbers are included in the figure of 3,419.

Parental consent was obtained and all arrangements for the immunisation of these children were made by Assistant County Medical Officers. Assisted by health visitors, the Assistant County Medical Officers, either on their own or with the help of local general medical practitioners, gave the injections.

(d) *B.C.G. Vaccination.*

Tuberculin testing and vaccination of all school children aged 11 years and upwards was carried out throughout the County, by health visitors and medical officers. Of the 9,641 children skin tested, 1,347 (14%) were already positive and therefore not eligible for vaccination. Protection against tuberculosis by B.C.G. vaccination was given to 7,676 children.

Table 32 shows details of the schemes carried out.

(e) *School Excursions Overseas—Vaccination and Inoculation.*

Parents of children going overseas in school parties were advised that protection against the typhoid group of fevers is a sensible precaution for anyone going abroad and that where children were vaccinated against smallpox in infancy, revaccination would increase their protection against this disease.

Facilities were available for inoculation and vaccination in the school clinics where a total of 245 children from 32 schools were inoculated against the typhoid fevers and 250 were revaccinated against smallpox.

HANDICAPPED PUPILS

The provision of special educational treatment for handicapped pupils continues to be one of the priorities in the County's development scheme.

The following figures show the distribution of handicapped children in the various categories (more detail is given in Table 33).

Blind	...	...	...	...	...	...	...	26
Partially sighted	...	...	...	...	...	...	...	26
Deaf	...	...	...	...	...	...	...	48
Partially hearing	...	...	...	...	...	...	...	58
Physically handicapped	...	...	...	...	...	...	...	179
Delicate	...	...	...	...	...	...	...	91
Epileptic	...	...	...	...	...	...	...	8
Educationally sub-normal	...	...	...	...	...	...	...	1,023
Maladjusted	...	...	...	...	...	...	...	319
Speech Defective	...	...	...	...	...	...	...	665

(a) *Blind and Partially Sighted.*

Blind Pupils:—

Two pupils were examined during the year by School Medical Officers, and after subsequent examination by consultant ophthalmologists were found to need education in a special school for the blind.

At the end of the year there were 25 pupils in such schools and one child awaiting admission.

Partially-Sighted:—

Six pupils were recommended for entry to special schools for the partially-sighted, and at the end of the year there were 20 children in such schools plus a further six who were awaiting admission.

(b) *Deaf and Partially Hearing.*

Deaf Pupils:—

Of the children examined during the year eight were recommended for education in special schools for deaf children. At the end of the year there were 48 children in such schools, and none awaiting admission.

Partially-Hearing Pupils:—

Five of the pupils examined were subsequently recommended for admission to units for partially-hearing children, and at the end of the year there were 53 children in the units.

The six units for partially-hearing children are gradually meeting the needs of this type of school child.

The junior units which also cater for infants are, however, full to capacity and this created certain delays in the admission of pupils in the lower age group. The establishment of three nursery infant units was unfortunately delayed, but the problem will be partially resolved when the first of these is opened in September, 1968.

The numbers of children screened for hearing defects in infants schools have increased considerably and examinations in clinics of children thought to have hearing defects have almost doubled.

Infants schools can now be visited annually and it is hoped to extend this service to cover the first year juniors. Due to staff shortage it has not been possible to do this in the past.

As a result of the increase of screening tests in schools a greater number of children were referred for examination by the school medical officers in the clinics. It was found that in the more favourable conditions many children who had failed the screening test now passed. One felt, therefore, that too many children were being referred to medical officers. In order to counteract this, the Senior Audiometrician in June 1967 started to hold "Preliminary Clinics" in selected areas where the work load was heaviest. As a result of this type of clinic the numbers of children finally referred to Medical Officers were reduced.

Statistics for the year are as follows:—

Screen Tested in Infant Schools

			<i>Boys.</i>	<i>Girls.</i>	<i>Total.</i>
Tested	...	...	11,471	10,697	22,168
Failed	...	...	1,706	1,518	3,224
% Incidence	...	...	14.87	14.19	14.54

Preliminary Clinics

<i>Number of Appointments.</i>	<i>No Further Action</i>	<i>For Further Observation</i>	<i>Did not Attend</i>
1,256	381 (30.3%)	624 (49.7%)	251 (20.0%)

Audiology Clinics

<i>Number of Appointments.</i>	<i>Referred to Consultants.</i>	<i>For Further Observation.</i>	<i>Did not keep Appointment.</i>	<i>No Further Action.</i>
6,559	542 (8.3%)	2,671 (40.7%)	1,748 (26.7%)	1,598 (24.3%)

During the year, the County Council approved a scheme for a comprehensive audiology service whereby the existing arrangements for testing children under five years and those attending school would be co-ordinated. Details of this scheme appear on page 18.

(c) *Physically Handicapped Pupils.*

The number of children with physical handicaps examined for the first time during the year was 35 and 184 were re-examined.

Of these children 142 were found to be able to cope with the conditions of the ordinary school, 6 were recommended for admission to special schools and 71 for tuition at home. At the end of the year there were 6 children awaiting places in special schools. No children were considered to be unsuitable for any type of education.

Fifty-nine physically handicapped children were attending special schools, 58 were receiving tuition at home and 56 in hospital.

(d) *Delicate Pupils.*

A total of 55 children were examined or re-examined during the year and 23 were found capable of attending ordinary schools. 24 were recommended for special schools, 8 for home tuition and review at a later date.

At the end of the year 80 delicate children were attending special schools, 6 were receiving home tuition and 5 were awaiting admission to special schools.

(e) *Epileptic Children.*

Seven children were examined or re-examined during the year.

There was one epileptic child awaiting a place in a special school at the end of the year. The number at present in special schools is six, and one child is receiving education at home.

(f) *Educationally Sub-Normal Children.*

During the year 259 children were examined and of these 61 children were found to be unsuitable for education in school. Details of the other recommendations appear in Table 33.

The Liaison Committee, consisting of Health, Education and Children's Committee representatives met quarterly to consider reports from the officers concerned, including the County Youth Employment Officer, on the progress and after-care of children needing supervision after leaving school.

(g) *Maladjusted Children.*

A total of 171 new cases were seen by a psychiatrist during the year, 52 of these were seen at the request of Juvenile Courts. At the end of the year there were 25 children in special schools.

(h) *Speech Defective Pupils.*

A total of four hundred and ten children received treatment in the speech clinics run by the school health service during 1967 whilst a further two hundred and fifty-five children from the Administrative County were known to have received treatment at the hospital clinics.

Diabetic and Epileptic Holiday Camps.

Arrangements were made for children to attend holiday camps under the auspices of the British Diabetic Association and the British Epilepsy Association as follows:—

The British Diabetic Association:—

Young Adventurers Camp, Suffolk	...	...	...	...	...	...	3
Cadogan House, Suffolk	...	...	...	...	...	...	1

The British Epilepsy Association:—

Boys' Village, St. Athan, Wales	...	...	...	...	...	...	1
City of Coventry's Boarding School, Cleobury Mortimer	...	...	...	...	...	...	3

MISCELLANEOUS MEDICAL EXAMINATIONS

Medical examinations other than periodic examinations in schools were undertaken as in previous years. Details are given below. (Figures in brackets refer to 1966).

(a) Examination under Section 18 of the Children and Young Persons Act, 1933.

These examinations are of children between the ages of 14 and 16 and are required to determine the fitness of children to receive employment licences and badges.

Part-time employment is usually that of newsboy, errand boy or shop assistant.

No. of children examined	...	...	...	...	...	233	(488)
No. of children unfit to be employed	...	...	...	...	...	2	(1)

(b) Examination under Section 22 of the Children and Young Persons Act, 1933.

These are examinations of children desiring to take part in entertainments.

No. of children examined	...	...	...	...	...	7	(1)
No. of children unfit	...	...	...	...	...	none	(none)

(c) Juvenile Courts.

No. of children or young persons examined arising out of proceedings in Juvenile Courts	4	(none)
---	-----	-----	-----	-----	-----	---	--------

(d) Candidates for Royal Air Force.								
Apprentices or Boy Entrants	...	...	...	...	...	none		(none)
(e) Candidates for admission to courses of training for teaching and to the teaching profession	...	...	...	...	...	993		(963)
(f) Superannuation cases	...	...	...	...	...	456		(378)

THE CHILD GUIDANCE CLINIC SERVICE

The Child Guidance Service continues to be very busy, although the absence of one of the psychiatric staff on sick leave slightly reduced the number of new cases seen at Durham. Mrs. von Leyden's return to Durham and the appointment of Mrs. Sanders as a part-time social worker at Jarrow, has now given us a reasonable number of social workers. We are, however, still short of psychologists.

There has been a sharp increase in the number of children referred for psychiatric examination from the Juvenile Courts (a total of 52 against 26 in 1966). It would seem, therefore, that we are providing a useful service for the Courts.

Both Leafield House Hostel and Redworth Hall Residential School for maladjusted children are visited weekly by psychiatrists, the latter being visited for two sessions weekly. Over the past year Redworth Hall has become more established and gradually increased its intake of pupils, although full development of the school has been hampered by the difficulty of finding suitably qualified residential staff. Since children are taken from all the authorities in the North-East region, the number of places for Durham children is necessarily limited, and a waiting list appears to be inevitable. Some of the same difficulties have also been encountered at Leafield, and for part of the year the intake there also had to be reduced. Nevertheless, in both establishments there is good evidence of the benefit the boys are receiving from their stay.

Figures of attendance for the clinics are as follows:—(attendances are given separately for Jarrow but the Durham and Bishop Auckland figures are combined as several children who initially attended Durham Child Guidance Centre were transferred to Bishop Auckland).

<i>Psychiatrists:</i>	New Cases:	Durham	...	...	137	
		Jarrow	...	...	34	

This includes 42 cases seen at Durham and 10 at Jarrow at the request of the Juvenile Courts.

<i>Psychologists:</i>	New Cases:	Durham at Clinic	...	38	74	
		at School	...	36		
		Jarrow at clinic	...	24	28	
		at school	...	4		

Additional interviews:	Durham	...	...	8	
	Jarrow	...	...	281	

School and home visits:	Durham	...	...	89	
	Jarrow	...	...	81	

<i>Social Workers:</i>	New Cases:	Durham at clinic	...	47	98	
		at home	...	51		
		Jarrow at clinic	...	8	13	
		at home	...	5		

Additional interviews:	Durham at clinic	...	407	701	
	at home	...	294		
	Jarrow at clinic	...	10	11	
	at home	...	1		

As in previous years, the clinics have been greatly helped by the full and generous co-operation of the School Psychological Service and other sections of the Education Department, the Children's Department, the Probation Service and the Health Service, all of whom have spared no effort where the welfare of the child has been concerned.

SPEECH THERAPY

In November, 1966, the County Council approved a new establishment for speech therapist. This establishment provides for one chief speech therapist, five senior speech therapists and 10 speech therapists. It was hoped that this structure would have a beneficial effect upon recruitment. Unfortunately, in spite of extensive advertising it was not possible to recruit any full-time speech therapists during 1967. To add to the difficulties, at the end of July the County Council lost the services of the remaining full-time speech therapist, Miss J. Custance, who took up an appointment with the Easington Rural District Council.

Following the resignation of Miss Custance it was necessary to curtail the speech clinics at Stanley, Houghton, Washington and Seaham. Her weekly visit to Hare Law Day School for E.S.N. Children had also to be suspended. Because of the staffing situation it was not possible to make alternative arrangements for all the children affected by the clinic closures, although a limited number of the more urgent cases have been referred to the hospitals for treatment.

In June Mrs. B. Strong, a former full-time officer of the Council, was engaged to hold a weekly session at East Boldon which proved to be most useful but this arrangement was terminated when Mrs. Strong and her family emigrated in December, 1967.

The problem of recruitment is not confined to the County Council. The Hospital Management Committees in the area are having similar difficulties. A report received from the Regional Hospital Board suggested that one of the factors influencing recruitment of speech therapists in the past has been the fact that neither local authorities nor the Hospital Management Committees offered the therapist a comprehensive range of experience (both hospital and community). The County Council have now agreed that all speech therapists should be given the opportunity of doing a limited amount of hospital work and this will be mentioned in all future advertisements.

At the end of the year there were only two part-time speech therapists in the service of the County Council and I would like to put on record the excellent work being carried out by these two ladies in spite of numerous difficulties.

DENTAL SERVICE

The Principal School Dental Officer reports as follows:—

At the beginning of 1967 we had the services of 19 full-time school dental officers and 9 part-time school dental officers, making an equivalent of 22.5 school dental officers. At the end of the year we had 16 full-time officers and 8 part-time officers, making an equivalent of 18.7 school dental officers. These numbers do not include the Excepted Districts of Easington and Stockton.

In January a Careers Convention held at Billingham Bede Hall Campus School was attended by the Principal School Dental Officer and a dental auxiliary who gave information with a view to recruiting school dental officers, dental auxiliaries and dental surgery assistants. A similar convention was held at Houghton Modern School at the end of February and the beginning of March.

In March four school dental officers attended an eight week part-time course in orthodontic techniques at Sunderland General Hospital.

On the 1st April, the new Hartlepool County Borough took over the Hartlepool Dental Clinic. Also many schools which had been previously served by Mobile Dental Van No. 4 were transferred to the Sunderland County Borough.

In April the Principal School Dental Officer attended an International Symposium of Child Dental Health in London. During the same month two school dental officers attended a two day revision course in dental radiology at Newcastle Dental Hospital.

Three of our dental surgery assistants attended a part-time evening course at Durham Technical College, and in May sat the British Dental Nurses examination. They were all successful.

In July the Principal School Dental Officer attended the annual conference of the British Dental Association at Birmingham University.

In August, at the County Show, a mobile dental van was on display. This proved very successful and many visitors were interested to see the interior of the dental van. The Apple and Pear Marketing Board kindly sent to us four boxes of apples for distribution at the County Show. We are most grateful for their generosity in sending the apples.

The services of a second dental auxiliary were obtained in September.

In November the school dental officer for the Seaham area moved from the old clinic to the new combined school clinic and maternity and child welfare centre.

Also in November the Principal School Dental Officer attended a post graduate study course in London on administration. In the same month two school dental officers attended a paedodontic course at Newcastle Dental Hospital.

In December, Colegate County Junior Mixed and Infants' School at Leam Lane Estate, Felling held a dental health week. The Principal School Dental Officer and the Dental Hygienist were invited to attend. Great interest was shown by the children and the campaign proved successful.

Over the year the Northern Counties and County Boroughs held Co-ordinating Committees periodically to which all principal school dental officers were invited. These proved most beneficial as each authority brought up any administrative problems being encountered in their area.

During the year talks were given by either the Principal School Dental Officer or school dental officers to various organisations interested in dental health and the Principal School Dental Officer attended the Science Advisory Panel at Durham Technical College.

Close liaison with the dental hospitals and general dental practitioners has been maintained.

Inspection and Treatment.

A reduction in the number of fillings of some 2,266 as compared with the previous year is noted. Also the number of extractions has reduced by some 2,678. This is no doubt due to the fact that we have had resignations from school dental officers for which we have been unable to secure replacements.

Once again our thanks to the Newcastle Dental Hospital, Sunderland General Hospital, North Ormesby Hospital, Dryburn Hospital and to the consultant orthodontists, and also to the radiographers and staff who have given us such valuable assistance.

NURSING AND HEALTH VISITOR SERVICES

The County Superintendent Health Visitor reports as follows:—

The establishment of school nurses is 34 and at the 31st December, 1967, there were 25 in post.

During the year health visitors and school nurses worked together in the care of families with special problems.

Duties in connection with Heaf testing and B.C.G. vaccination were largely transferred from health visitors to school nurses who also attended sessions of immunisation and vaccination of school children.

Most of the duties involving escort of handicapped children were carried out by the school nurses and the transfer of cleanliness surveys from the health visitors to school nurses was almost completed.

Either health visitors or school nurses were in attendance when doctors carried out routine medical examinations in the schools, when examinations were carried out on potential employees of the County Council, college entrants for teacher training and handicapped pupils, and also assisted in cleanliness surveys, immunisation and vaccination programmes, and in school clinics. 13,273 home visits were paid and 160 days spent on escort duties.

During the cleanliness survey 70,740 girls were examined in 567 departments of 445 schools and it was found that 3,380 were unclean, i.e. showed evidence of nits or vermin (98 verminous). Table 34 shows the number of subsequent examinations of the unclean children, and provides also a comparison with previous years. (In 104 schools all the children were found to be clean).

Where appropriate visits were paid to the homes of the children who were found to be unclean.

HEALTH EDUCATION IN SCHOOLS

In October, 1967, an advisory committee on health education was set up consisting of myself and several other members of the Health Department together with members of the Education Department staff, including representatives of the teaching profession, for the purpose of introducing a special detailed programme of health education in schools. It was decided that a pilot scheme should be carried out in selected schools and a scheme is at present being formulated.

PROVISION OF SCHOOL MEALS

Plans have been approved for the provision of kitchen dining rooms at eight new schools and for kitchen facilities at 13 existing schools at present being supplied with meals from central kitchens.

Details of new kitchen dining rooms opened during 1967 are shown in Table 35.

Statistics showing the position on 31st December, 1967 :—

Central Kitchens	...	...	...	...	...	...	...	31
School Canteens—								
Grammar	...	...	...	...	...	...	...	22
Primary and Modern	...	...	...	...	...	...	...	168
Nursery...	...	...	...	...	...	...	...	18
School Dining Centres	...	...	...	...	...	...	...	349
Meals supplied during 12 months ending 31st December, 1967 :—								
Free	...	...	...	...	...	...	...	2,507,717
on Payment	...	...	...	...	...	...	...	13,816,279
						TOTAL	...	<u><u>16,323,996</u></u>

PART III

STATISTICAL TABLES

A. HEALTH AND WELFARE

TABLE I.

POPULATION, BIRTH RATE, DEATH-RATE, ETC., WITHIN THE ADMINISTRATIVE COUNTY OF DURHAM, 1967.

Districts.	Medical Officer of Health.	Area in Acres.	Registrar General's estimated Resident Population 1967	Live Births.	Still Births.	Deaths.	Birth-rate.	Death-rate.	Death-rate from seven Principal Infective Diseases.	Infant Mortality-rate per 1,000 Births.	Phthisis Death-rate.	Total Tuberculosis Death-rate.	Lung Diseases Death-rate.	Deaths occurring outside District included.	Deaths occurring within District excluded.
AREA No. 1. Blaydon U.D.	J. A. Dryden, M.A., B.Sc., M.B., B.Chir., D.P.H., D.I.H.	9,235 5,145 6,074	31,880 14,700 27,890	539 296 512	8 4 4	307 180 260	16.9 20.1 18.4	9.6 12.9 9.3	— — —	19 14 18	0.07 0.07 0.04	1.09 1.38 1.15	48 12 190	157 90 98	48 12 190
Rayton U.D.	Do.	20,454	74,470	1,347	16	747	18.1	10.0	—	17	0.05	0.05	1.07	345	250
Whickham U.D.	Do.														
AREA No. 2. Jarrow M.B.	H. C. Weir, M.A., M.B., B.Ch., B.A.O., D.P.H.	1,948 3,257 1,555	29,120 38,870 24,940	533 616 448	14 10 6	318 380 262	18.7 15.8 18.0	11.1 9.8 10.5	— — —	11 18 20	0.10 — —	1.27 1.97 1.24	140 197 103	9 8 8	9 8 8
Felling U.D.	Do.	6,760	92,930	1,597	30	960	17.2	10.3	—	16	0.03	0.03	1.14	440	25
Hebburn U.D.	Do.														
AREA No. 3. Consett U.D.	R. Hill, M.B., B.Ch., D.P.H.	10,042 12,659 44,243	37,500 44,690 14,900	592 674 253	4 13 1	387 509 237	15.8 15.1 15.9	10.3 11.4 0.07	0.05 24 16	22 24 16	0.05 0.11 0.20	1.07 1.28 2.48	64 296 57	449 9 107	449 9 107
Stanley U.D.	Do.	66,944	97,090	1,519	18	1,133	15.6	11.7	0.06	22	0.10	0.11	1.38	417	565
Lanchester R.D.	Do.														
AREA No. 4. Chester-le-Street U.D.	J. L. Siddle, M.B., B.S., D.P.H.	2,656 22,222	20,300 45,680	370 783	6 10	238 490	18.2 17.1	11.7 10.7	— 0.02	8 14	— 0.04	— 0.04	1.24 1.16	35 265	223 6
Chester-le-Street R.D.	Do.	24,878	65,980	1,153	16	728	17.5	11.0	0.02	12	0.03	0.03	1.18	300	229
Baldon U.D.	H. C. Weir, M.A., M.B., B.Ch., B.A.O., D.P.H., D.T.M. & H., D.P.H.	7,344 4,552 17,020 31,610 6,754 2,447 20,050	22,760 242 555 386 10.8 10.1 20.5	397 6 12 341 6 4 92	9 234 202 341 17.6 15.3 20.5	16.8 14.2 10.8 10.1 10.4	9.9 11.9 10.8 10.0 10.4	— — — — 0.05	— — — — —	13 25 23 34 27	0.12 0.12 0.09 0.08 0.10	1.95 1.76 1.27 1.31 1.15	119 121 198 123 104	12 6 4 109 3	
Hertton U.D.	P. A. Y. Narayanan, M.B., B.S., D.T.M. & H., D.P.H.														
Fonthill & Le-Spring U.D.	Do.														
Seaham U.D.	J. W. A. Rodgers, M.B., B.Ch., D.P.H.														
Washington U.D.	P. A. Y. Narayanan, M.B., B.S., D.T.M. & H., D.P.H.														
Sunderland R.D.	Do. until 31.3.1967														
Do.															
AREA No. 5. Crook & Willington U.D.	G. A. Macgregor, M.D., D.P.H.	15,476 477 99,513	23,660 2,830 8,190	338 52 107	4 3 3	338 36 133	14.3 18.4 13.1	14.3 12.7 16.2	— — —	24 19 —	— — —	— — —	1.52 1.41 0.98	96 14 27	45 6 14
Tow Law U.D.	Do.														
Weardale R.D.	Do.														
AREA No. 6. Durham M.B.	R. G. Drummond, M.B., Ch.B., D.P.H.	4,578 8,224 34,070	24,410 18,900 37,660	344 322 690	4 2 13	289 236 371	14.1 17.0 18.3	11.8 12.5 9.9	— — —	9 19 16	— — 0.08	— — 0.08	1.27 1.25 1.43	30 95 162	362 8 11
Brandon & Byshorthes U.D.	Do.														
Durham R.D.	Do.														
AREA No. 7. Barnard Castle U.D.	A. S. M. Wilson, L.R.C.P., L.R.F.P.S., D.P.H.	559 110,118	5,410 17,520	84 234	— 4	74 180	15.5 13.4	13.7 10.3	— —	24 26	0.18 —	1.85 0.67	22 92	37 4	381
Barnard Castle R.D.	Do.														
AREA No. 8. Bishop Auckland U.D.	J. M. Hegarty, M.B., B.Ch., B.A.O., D.P.H.	9,332 4,827 7,543	34,650 13,820 18,450	613 217 257	7 3 3	413 174 200	17.7 15.7 13.9	11.9 12.6 10.8	0.03 — —	26 23 16	— — —	0.95 1.30 0.87	47 78 97	355 4 2	
Shildon U.D.	Do.														
Spennymoor U.D.	Do.														
AREA No. 9. Stockton M.B.	J. W. A. Rodgers, M.B., B.Ch., D.P.H.	128,109	113,980	1,087	12	787	16.3	11.8	0.01	23	—	0.03	1.00	222	361
Stockton R.D.	Do.														
Billingham U.D.	L. R. Benham, M.B., B.S., D.P.H.	7,855	35,000	590	13	291	16.9	8.3	0.14	22	0.09	0.11	0.77	189	13
Darlington R.D.	M. W. Rodgers, M.B., B.Ch., B.A.O., D.P.H.	45,173	28,910	499	8	206	17.2	7.1	—	16	0.11	0.11	1.38	106	10
Sedgefield R.D.	Do.	39,057	35,190	536	2	486	15.2	13.8	—	22	0.11	0.11	2.79	82	535
Stockton R.D.	L. R. Benham, M.B., B.S., D.P.H.	36,024	14,900	265	4	103	17.6	6.9	—	26	—	—	1.14	55	4
Easington R.D.	J. W. A. Rodgers, M.B., B.Ch., D.P.H.	34,673	86,230	1,524	25	956	17.7	11.1	—	28	0.11	0.12	1.52	337	230
Stockton M.B.	H. J. Peters, M.B., B.S., B.Hy., D.P.H., D.P.A.	5,988	83,660	1,639	40	869	19.6	10.4	0.07	25	0.05	0.06	1.24	376	175
ADMINISTRATIVE COUNTY	Do.	610,192	936,480	16,035	253	10,280	17.0	10.9	0.02	21	0.06	0.06	1.43	4,072	3,012

TABLE 2.

ADMINISTRATIVE COUNTY OF DURHAM.

COMPARISON OF DEATHS IN CERTAIN AGE GROUPS, 1900-1967.

Year.	Death Rate.	Percentage of Total Deaths.						
		Under 1 year.	1-14 years.	15-24 years.	25-44 years.	45-64 years.	65-74 years.	75 years and over.
1900	18.6	32.0	17.7	5.5	—	26.9	—	17.9
1910	14.3	29.1	16.6	5.2	—	28.2	—	20.9
1920	11.5	25.4	15.6	5.1	11.7	18.5	—	—
1930	11.2	13.7	10.6	5.3	11.7	23.6	—	—
1940	13.1	8.4	4.9	3.9	10.0	26.3	24.4	22.1
1950	11.8	6.1	1.9	1.6	6.3	23.8	27.7	32.6
1960	11.5	4.5	1.1	0.8	3.9	25.0	26.8	37.9
1967	10.9	3.2	0.9	0.9	3.6	24.6	28.3	38.5
					28.2		66.8	

TABLE 3.
ADMINISTRATIVE COUNTY OF DURHAM.—CLASSIFICATION OF DEATHS AS SUPPLIED BY THE REGISTRAR GENERAL, 1967.

CAUSES OF DEATH.	*URBAN DISTRICTS						RURAL DISTRICTS						MALE.						FEMALE.									
	TOTAL		M	F	M	F	Under 4 weeks		4 weeks to 1 year		1—5—		5—15—		15—25—		25—35—		35—45—		45—55—		55—65—		65—		75 & over	
1. Tuberculosis, respiratory	53	40	13	27	4	13	9	—	1	—	1	4	10	16	5	—	—	1	2	3	3	4	—	—	—	—		
2. Tuberculosis, other	6	4	2	3	2	1	—	—	—	—	—	1	1	3	—	—	—	—	—	—	—	—	—	—	—	1		
3. Syphilitic disease	12	8	4	4	3	4	1	—	—	—	—	1	4	3	—	—	—	—	—	—	—	—	—	—	—	1		
4. Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
5. Whooping Cough	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
6. Meningococcal infections	—	—	4	1	3	1	2	—	—	—	—	—	—	—	—	—	—	—	2	1	—	—	—	—	—	—		
7. Acute poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
8. Measles	—	—	3	—	3	—	3	—	—	—	—	—	—	—	—	—	—	—	—	1	2	—	—	—	—	—		
9. Other infective and parasitic diseases	17	10	7	6	5	4	2	—	2	—	—	1	2	2	—	—	—	—	1	—	—	—	—	—	—	1		
10. Malignant neoplasm, stomach	314	169	145	124	104	45	41	—	—	—	—	1	5	19	40	61	43	—	—	2	4	12	31	39	57	—		
11. Malignant neoplasm, lung, bronchus	522	441	81	311	66	130	15	—	—	—	—	1	5	58	152	157	59	—	—	—	4	12	28	22	14	—		
12. Malignant neoplasm, breast	140	1	139	—	100	1	39	—	—	—	—	—	—	—	—	—	—	—	—	—	—	11	31	41	40	16		
13. Malignant neoplasm, uterus	57	—	57	—	42	—	15	—	—	—	—	—	—	—	—	—	—	—	—	—	1	2	14	11	20	9		
14. Other malignant & lymphatic neoplasms	911	476	435	346	325	130	110	—	—	—	—	4	4	3	6	21	41	94	156	147	—	4	2	1	13	104		
15. Leukaemia, aleukæmia	42	23	19	13	16	10	3	—	—	—	—	3	1	1	3	4	8	2	—	—	5	1	—	1	1	5		
16. Diabetes	—	—	109	38	71	23	42	15	29	—	—	—	—	—	—	—	—	—	—	—	—	1	4	9	32	25		
17. Vascular lesions of nervous system	1,540	684	856	473	570	211	286	—	—	1	—	1	4	6	26	107	220	319	—	—	1	2	12	27	77	231		
18. Coronary disease, angina	2,500	1,508	992	1,047	670	461	322	—	—	—	—	4	49	163	404	496	392	—	—	3	2	4	45	158	351	429		
19. Hypertension with heart disease	138	60	78	36	48	24	24	—	—	—	—	—	1	3	9	27	20	—	—	1	5	6	27	30	—			
20. Other heart disease	803	347	456	238	315	109	141	—	—	—	—	2	4	10	21	43	78	188	—	—	2	1	11	16	40	72		
21. Other circulatory disease	—	—	428	203	225	143	159	60	66	—	—	—	—	2	2	5	21	48	125	1	—	1	1	4	16	37	161	
22. Influenza	—	—	8	4	3	2	1	2	—	—	—	—	1	2	—	—	—	—	—	—	—	—	—	—	—	4		
23. Pneumonia	—	—	469	210	259	117	146	93	113	5	20	2	4	2	3	25	108	164	150	—	2	1	—	5	22	40		
24. Bronchitis	—	—	576	455	121	297	82	158	39	3	1	—	—	1	3	5	24	91	4	25	1	—	1	3	5	23		
25. Other diseases of respiratory system	132	91	41	60	28	31	13	—	1	—	—	2	3	7	19	33	26	—	1	—	1	2	5	1	6	25		
26. Ulcer of stomach and duodenum	63	48	15	33	8	15	7	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	5		
27. Gastritis, enteritis and diarrhoea	47	19	28	14	20	5	8	2	—	—	6	—	—	—	—	—	—	—	—	5	—	—	2	3	5	9		
28. Nephritis and nephrosis	50	25	25	21	17	4	8	—	—	—	—	1	—	1	3	5	4	7	4	—	—	—	—	—	—	2		
29. Hyperplasia of prostate	—	17	17	—	12	—	5	—	—	—	—	—	—	—	—	—	—	1	16	—	—	—	—	—	—	—		
30. Pregnancy, childbirth, abortion	—	2	—	2	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
31. Congenital malformations	94	54	40	42	30	12	10	27	11	1	3	2	—	3	3	—	—	24	3	4	1	3	—	—	3			
32. Other defined and ill-defined diseases	797	341	456	223	305	118	151	88	8	3	8	9	4	18	22	34	67	80	73	4	3	5	6	9	13	21	48	
33. Motor vehicle accidents	136	96	40	65	28	31	12	—	—	—	7	8	20	10	9	10	11	8	13	—	1	1	6	1	2	3	4	
34. All other accidents	—	—	221	123	98	83	70	40	28	—	5	4	8	10	9	12	14	17	16	28	1	3	2	4	2	11	13	
35. Suicide	—	—	64	23	28	17	13	6	—	—	2	5	11	10	3	5	—	—	—	—	2	2	3	1	2	2	2	
36. Homicide and operations of war	—	—	5	2	3	1	2	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
Total	..	10,280	5,539	4,741	3,794	3,232	1,745	1,509	122	59	27	34	56	57	175	455	1,137	1,668	1,749	103	48	14	20	33	35	105	283	
																											2,203	

*Including Municipal Boroughs of Durham, Jarrow and Stockton.

TABLE 4.

Comparative Vital Statistics, Administrative County of Durham and England and Wales, 1967.

	Rates per 1,000 Population.											Maternal Mortality.	
			DEATHS.										
	Live Births	Still Births	All Causes	Typhoid and Para-Typhoid	Whooping Cough	Diphtheria	Tuberculosis	Influenza	Acute Poliomyelitis	Pneumonia	Under one year—all causes	Enteritis and Diarrhoea Under 2 years	
DURHAM COUNTY ...	17.0	0.27	10.9	0.001	—	—	0.06	0.008	—	0.50	20.7	0.94	0.12
*ENGLAND and WALES	17.2	0.26	11.2	0.00	0.00	—	0.04	0.02	—	0.79	18.3	†	0.20

* Provisional.

† Not available.

TABLE 5.

ADMINISTRATIVE COUNTY OF DURHAM.

COMPARATIVE BIRTH AND INFANT MORTALITY STATISTICS, 1958-1967.

Year.	Births.	Deaths under 1 year.	Infant Mortality Rate.	Perinatal Mortality Rate.	Early Neo-Natal Mortality Rate.	Infant Mortality Rate. 1 week—1 year.
1958	17,414	443	25	37.8	14.9	10.3
1959	16,976	453	27	39.1	16.0	10.5
1960	17,622	488	28	40.1	17.0	10.4
1961	17,411	407	23	35.7	13.8	9.3
1962	17,910	467	26	35.7	16.4	9.5
1963	17,639	396	22	32.4	13.5	8.8
1964	17,726	406	23	33.5	13.8	8.8
1965	17,601	362	21	30.7	12.0	8.4
1966	16,997	357	21	28.6	11.6	9.2
1967	16,035	332	21	26.6	11.3	9.3

HOME NURSING STATISTICS.

TABLE 6.

Year.	Staff.		General Medical.		General Surgical.		Infectious Diseases.		Tuberculosis.		Maternal Complications		Others.		Total.	
	Whole-time	Part-time	Cases	Visits	Cases	Visits	Cases	Visits	Cases	Visits	Cases	Visits	Cases	Visits		
1966	115	25	11,514	307,099	3,601	84,779	22	378	381	22,277	116	1,657	—	7,948	15,634	424,138
1967	110	18	13,901	299,608	4,249	89,688	1	50	485	23,627	132	920	51	7,719	18,819	421,612

Year.	Patients included in above Table who were 65 or over at the time of the first visit during the year.		Children included in above Table who were under 5 at the time of the first visit during the year.		Patients included in above Table who have had more than 24 visits during the year.	
	Cases	Visits	Cases	Visits	Cases	Visits
1966	7,963	258,591	608	4,727	5,642	333,187
1967	9,702	263,993	818	5,236	4,634	283,371

TABLE 7.

ADMINISTRATIVE COUNTY OF DURHAM.

Number of Persons Vaccinated or Re-vaccinated against Smallpox for which records were received during the year 1967

District.	VACCINATED Age at date of Vaccination.					RE-VACCINATED Age at date of Re-vaccination.				
	Under 1	1	2 to 4	5 to 15	Total	Under 1	1	2 to 4	5 to 15	Total
<i>Area No. 1.</i>										
Blaydon U.D.	20	233	35	18	306	—	—	1	1	2
Ryton U.D.	4	145	21	8	178	—	—	—	6	6
Whickham U.D.	12	205	30	10	257	—	—	4	3	7
<i>Area No. 2.</i>										
Jarrow M.B.	25	157	24	8	214	—	—	2	1	3
Felling U.D.	24	233	56	14	327	—	—	1	4	5
Hebburn U.D.	36	138	24	14	212	—	—	—	2	2
<i>Area No. 3.</i>										
Consett U.D.	18	252	22	13	305	—	—	2	6	8
Stanley U.D.	15	281	32	9	337	—	—	1	1	2
Lanchester R.D.	11	82	13	4	110	—	—	3	5	8
<i>Area No. 4.</i>										
Chester-le-Street U.D.	6	192	21	10	229	—	—	2	12	14
Chester-le-Street R.D.	24	267	34	21	346	—	—	—	3	3
<i>Area No. 5.</i>										
Boldon U.D.	24	155	23	16	218	—	—	—	4	4
Hetton U.D.	4	72	5	8	89	—	—	—	1	1
Houghton-le-Spring U.D.	11	180	22	13	226	—	—	—	8	8
Seaham U.D.	12	114	13	3	142	—	—	—	2	2
Washington U.D.	13	132	11	3	159	—	—	1	6	7
<i>Area No. 6.</i>										
Crook & Willington U.D.	12	89	29	11	141	—	—	1	14	15
Tow Law U.D.	1	9	7	1	18	—	—	—	1	—
Weardale R.D.	2	55	20	12	89	—	—	—	—	1
<i>Area No. 7.</i>										
Durham M.B.	12	177	29	13	231	—	—	—	13	13
Brandon & Byshottles U.D.	4	72	22	4	102	—	—	—	—	—
Durham R.D.	36	259	40	17	352	—	—	2	10	12
<i>Area No. 8.</i>										
Barnard Castle U.D.	1	6	8	6	21	—	—	—	6	6
Barnard Castle R.D.	3	45	26	17	91	—	—	—	6	6
<i>Area No. 9.</i>										
Bishop Auckland U.D.	35	182	54	14	285	—	—	—	13	13
Shildon U.D.	6	56	27	7	96	—	—	1	—	1
Spennymoor U.D.	3	83	14	15	115	—	—	—	6	6
<i>Area No. 10.</i>										
Billingham U.D.	35	182	64	19	300	—	—	5	15	20
Darlington R.D.	9	130	67	23	229	—	—	2	6	8
Sedgefield R.D.	15	187	23	6	231	—	—	1	6	7
Stockton R.D.	12	131	24	3	170	—	—	—	2	2
<i>Easington R.D.</i>	39	338	75	64	516	—	—	3	11	14
<i>Stockton M.B.</i>	59	268	145	29	501	—	—	9	54	63
ADMINISTRATIVE COUNTY	543	5,107	1,060	433	7,143	—	—	41	228	269

TABLE 8.

POLIOMYELITIS, DIPHTHERIA, WHOOPING COUGH AND TETANUS IMMUNISATION

No. of persons immunised against Poliomyelitis, Diphtheria, Whooping Cough and Tetanus for which records were received during the year ended 31st December, 1967

Type of Vaccine or Dose	Completed Primary Courses				Others Under Age 16	Total	Reinforcing Doses				Others Under Age 16	Total	
	1967	1966	1965	1964	1960-63		1967	1966	1965	1964	1960-63		
Quadruple DTPP	—	8	11	8	20	13	60	—	2	7	10	29	13
Triple DTP	...	4,996	6,340	607	292	415	38	12,688	39	1,358	3,436	579	3,327
Diphtheria/Pertussis	...	—	1	—	—	4	5	—	—	—	—	—	11
Diphtheria/Tetanus	...	48	106	42	43	2,145	233	2,617	7	145	282	93	6,295
Diphtheria	...	1	1	—	—	10	3	15	—	2	2	3	594
Pertussis	...	—	—	—	—	—	—	—	—	—	—	—	—
Tetanus	...	6	9	14	13	158	388	588	1	3	8	9	351
Salk	...	1	4	5	1	4	—	15	—	1	2	3	16
Sabin (Oral)	...	2,564	8,145	1,247	581	2,609	408	15,554	57	331	616	157	10,301
TOTALS Diphtheria	...	5,045	6,456	660	343	2,590	291	15,385	46	1,507	3,727	685	10,245
Whooping Cough	...	4,996	6,349	618	300	435	55	12,753	39	1,360	3,443	589	3,356
Tetanus	...	5,050	6,463	674	356	2,738	672	15,953	47	1,508	3,733	691	10,002
Poliomyelitis	...	2,565	8,157	1,263	590	2,633	421	15,629	57	334	625	170	10,346

TABLE 9.

ADMINISTRATIVE COUNTY OF DURHAM.

AMBULANCE SERVICE—STATISTICS, 1948-67.

Year	Out-PATIENTS ONLY		GENERAL SERVICE†		EMERGENCY SERVICE		TOTALS GENERAL AND EMERGENCY CASES		Total Mileage	Ambu- lances	Men					
	No. of Journeys	Stretcher cases	Sitting cases	Total	Stretcher cases	Sitting cases	Total	Stretcher cases	Sitting cases							
*1948	22,989	3,280	17,846	21,126	15,259	23,762	39,021	1,277	—	1,277	16,536	23,762	40,298	552,486	72	118
1949	61,906	7,395	63,463	70,858	29,609	84,995	114,604	2,321	1,428	3,749	31,930	86,423	118,353	1,501,047	92	248
1950	79,896	10,635	89,624	100,259	34,032	120,982	155,014	2,269	2,008	4,277	36,301	122,990	159,291	1,979,681	86	268
1951	86,429	13,697	128,320	142,017	34,833	163,807	198,640	5,737	5,635	11,372	40,570	169,442	210,012	2,129,585	99	270
1952	90,243	19,587	199,937	219,524	35,954	239,672	275,626	11,044	6,778	17,822	46,998	246,450	293,448	2,268,166	93	271
1953	92,329	18,527	197,915	216,442	34,374	240,721	275,095	12,322	7,373	19,695	46,696	248,094	294,790	2,286,856	91	272
1954	93,135	19,267	196,621	215,888	35,221	241,757	276,978	14,357	7,277	21,634	49,578	249,034	298,612	2,253,087	100	281
1955	90,796	18,220	208,783	227,003	33,559	254,652	288,211	15,424	7,553	22,977	48,983	262,205	311,188	2,303,313	97	272
1956	89,380	18,584	203,795	222,379	34,405	248,310	282,715	16,640	7,319	23,959	51,045	255,629	306,674	2,259,284	98	283
1957	91,504	17,691	203,104	220,795	34,781	249,720	284,501	18,071	7,480	25,551	52,852	257,200	310,052	2,269,711	91	277
1958	89,853	17,926	200,533	218,459	34,696	247,873	282,569	17,915	6,923	24,838	52,611	254,796	307,407	2,257,907	94	290
1959	86,380	15,996	199,211	215,207	31,788	244,302	276,090	18,657	6,596	25,253	50,445	250,898	301,343	2,212,705	86	289
1960	89,368	16,401	214,301	230,702	32,036	259,967	292,003	20,572	6,789	27,361	52,608	266,756	319,364	2,284,635	80	290
1961	88,588	17,296	232,206	249,502	32,311	276,423	308,734	21,890	6,395	28,285	54,201	282,818	337,019	2,318,275	90	286
1962	95,417	18,513	255,418	273,931	32,820	300,159	332,979	22,454	6,570	29,024	55,274	306,729	362,003	2,448,132	96	286
1963	95,865	18,808	273,080	291,888	32,984	319,428	352,412	24,168	6,789	30,957	57,152	326,217	383,369	2,554,115	92	291
1964	97,714	15,567	304,843	320,410	28,714	349,623	378,337	25,561	7,251	32,812	54,275	356,874	411,149	2,629,853	99	292
1965	96,072	13,165	297,131	310,296	26,029	340,653	366,682	25,530	7,814	33,344	51,559	348,467	400,026	2,600,320	117	286
1966	96,665	12,229	295,772	308,001	24,496	338,878	363,374	25,919	8,151	34,070	50,415	347,029	397,444	2,624,199	134	312
1967	96,695	13,390	303,062	316,452	24,916	343,866	366,782	25,361	8,420	33,781	50,277	352,286	402,563	2,696,792	140	319

* Half year only.

† Part of the increase in the figures recording the patients carried is due to the revised method of annual costing laid down by the Ministry of Health in Circular 25/51, which became operative on 1st August, 1951.

‡ Includes figures shown under "OUT-PATIENTS ONLY".

TABLE 10.

ADMINISTRATIVE COUNTY OF DURHAM, 1967.

TUBERCULOSIS—NEW CASES AND MORTALITY.

AGE PERIOD.	NEW CASES.									DEATHS.								
	Respiratory.			Non-Respiratory.			Total	Respiratory.			Non-Respiratory.			Total				
	M.	F.	T.	M.	F.	T.		M.	F.	T.	M.	F.	T.		M.	F.	T.	
0	1	—	1	—	—	—	1	1	—	1	—	—	—	—	—	—	—	1
1	4	3	7	1	1	2	9	1	—	1	—	—	—	—	—	—	—	1
5	4	5	9	—	3	3	12	—	—	—	—	—	—	—	—	—	—	—
15	16	14	30	—	4	4	34	2	—	2	—	—	—	—	—	—	—	2
25	18	15	33	4	4	8	41	—	1	1	—	—	—	—	—	—	—	1
35	32	25	57	1	4	5	62	1	2	3	—	1	1	1	1	1	1	4
45	43	19	62	—	1	1	63	4	3	7	—	—	—	—	—	—	—	7
55	43	7	50	2	—	2	52	10	3	13	1	—	1	—	1	—	1	14
65	21	3	24	1	—	1	25	16	4	20	3	—	3	—	3	—	3	23
75 and upwards ...	7	6	13	—	—	—	13	5	—	5	—	1	1	1	1	1	1	6
Age Unknown	—	—	—	1	—	1	1	—	—	—	—	—	—	—	—	—	—	—
Totals ...	189	97	286	10	17	27	313	40	13	53	4	2	6	—	—	—	—	59

TABLE 11.
ADMINISTRATIVE COUNTY OF DURHAM, 1967.

Notifications of tuberculosis in each urban and rural district of the administrative county during the period 1st January, 1967 to 31st December, 1967.

District.	Primary Notifications of new cases of Tuberculosis.			
	Respiratory.		Non-respiratory.	
	Males.	Females.	Males.	Females.
<i>Area No. 1.</i>				
Blaydon U.D.	8	4	—	—
Ryton U.D.	1	—	—	—
Whickham U.D.	6	2	—	—
<i>Area No. 2.</i>				
Jarrow M.B.	11	6	—	—
Felling U.D.	9	8	—	4
Hebburn U.D.	9	2	—	2
<i>Area No. 3.</i>				
Consett U.D.	8	4	—	2
Stanley U.D.	8	4	3	1
Lanchester R.D.	3	—	—	—
<i>Area No. 4.</i>				
Chester-le-Street U.D.	3	—	—	—
Chester-le-Street R.D.	7	1	—	—
<i>Area No. 5.</i>				
Boldon U.D.	5	4	—	—
Henton U.D.	8	6	—	—
Houghton-le-Spring U.D.	11	6	—	1
Seaham U.D.	10	4	1	1
Washington U.D.	6	—	—	—
<i>Area No. 6.</i>				
Crook and Willington U.D.	2	—	—	—
Tow Law U.D.	—	—	—	—
Weardale R.D.	—	—	1	—
<i>Area No. 7.</i>				
Durham M.B.	5	4	—	1
Brandon and Byshottles U.D.	2	1	—	1
Durham R.D.	4	4	—	1
<i>Area No. 8.</i>				
Barnard Castle U.D.	—	2	—	—
Barnard Castle R.D.	1	—	—	—
<i>Area No. 9.</i>				
Bishop Auckland U.D.	5	5	—	—
Shildon U.D.	1	—	—	—
Spennymoor U.D.	4	3	—	1
<i>Area No. 10.</i>				
Billingham U.D.	7	1	—	—
Darlington R.D.	3	—	1	1
Sedgefield R.D.	8	2	—	—
Stockton R.D.	1	1	—	—
Easington R.D.	13	10	2	—
Stockton M.B.	20	13	2	1
ADMINISTRATIVE COUNTY ...	189	97	10	17

TABLE 12.

ADMINISTRATIVE COUNTY OF DURHAM, 1967.

DEATHS FROM RESPIRATORY TUBERCULOSIS.

District.	4 weeks & under 1 year		1-4		5-14		15-24		25-34		35-44		45-54		55-64		65-74		75 and upwards		Total.			
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
<i>Area No. 1.</i>																								
Blaydon U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—	2	—
Ryton U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—
Whickham U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1
<i>Area No. 2.</i>																								
Jarrow M.B.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	3	—	—	—	3
Felling U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Hebburn U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
<i>Area No. 3.</i>																								
Consett U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	2	—	1	—	1	—
Stanley U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	1	—	1	—	3
Lanchester R.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	1	—	3
<i>Area No. 4.</i>																								
Chester-le-Street U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	1	—	—
Chester-le-Street R.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	2	1
<i>Area No. 5.</i>																								
Boldon U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Henton U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	2
Houghton-le-Spring U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—	2
Seaham U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	2
Washington U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	2
<i>Area No. 6.</i>																								
Crook and Willington U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tow Law U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Weardale R.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
<i>Area No. 7.</i>																								
Durham M.B.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Brandon and Byshottles U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Durham R.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	—	1	2
<i>Area No. 8.</i>																								
Barnard Castle U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1
Barnard Castle R.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
<i>Area No. 9.</i>																								
Bishop Auckland U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Shildon U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Spennymoor U.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
<i>Area No. 10.</i>																								
Billingham U.D.	—	—	—	—	—	1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	—	3
Darlington R.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	2
Sedgefield R.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	2	—	—	1	—	2
Stockton R.D.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Easington R.D.	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	1	—	1	—	1	2	1
Stockton M.B.	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1	2	—	—	—	3
ADMINISTRATIVE COUNTY ...	1	—	1	—	—	—	—	2	—	—	1	1	2	4	3	10	3	16	4	5	—	40	13	

TABLE 13.
ADMINISTRATIVE COUNTY OF DURHAM.
DEATHS FROM NON-RESPIRATORY TUBERCULOSIS.

Area No.	District							Age Period	Sex	No. of deaths
3	Stanley U.D.	...	...	...	...	...	...	65 — 74	Male	1
9	Shildon U.D.	...	...	...	...	...	...	35 — 44	Female	1
9	Spennymoor U.D.	...	...	...	...	...	...	75 & Over	Female	1
10	Billingham U.D.	...	...	...	...	...	...	55 — 64	Male	1
	Easington R.D.	...	...	...	...	...	...	65 — 74	Male	1
—	Stockton M.B.	...	...	...	...	...	...	65 — 74	Male	1

TABLE 14.
ADMINISTRATIVE COUNTY OF DURHAM.—New Cases and Deaths (with Death-rates and Attack-rates), 1938-1967.
TUBERCULOSIS.

Year.	RESPIRATORY.				NON-RESPIRATORY.				TOTAL			
	New Cases	Number of Deaths	*Death Rate	*Attack Rate	New Cases	Number of Deaths	*Death Rate	*Attack Rate	New Cases	Number of Deaths	*Death Rate	*Attack Rate
1938	656	470	0.53	0.74	595	124	0.14	0.67	1,251	594	0.67	1.42
1939	705	509	0.58	0.80	520	121	0.14	0.59	1,225	630	0.72	1.39
1940	671	526	0.61	0.79	474	82	0.10	0.56	1,145	608	0.72	1.35
1941	770	542	0.65	0.92	481	106	0.13	0.57	1,251	648	0.77	1.49
1942	757	435	0.53	0.92	492	123	0.15	0.60	1,249	558	0.67	1.52
1943	836	514	0.63	1.03	530	90	0.11	0.65	1,366	604	0.74	1.68
1944	914	423	0.51	1.11	481	100	0.12	0.59	1,395	523	0.63	1.70
1945	913	458	0.55	1.10	514	104	0.13	0.62	1,427	562	0.68	1.72
1946	1,051	430	0.50	1.22	385	111	0.13	0.45	1,436	541	0.63	1.66
1947	1,008	516	0.59	1.16	338	96	0.11	0.39	1,346	612	0.70	1.55
1948	1,127	436	0.49	1.27	295	92	0.10	0.33	1,422	528	0.59	1.60
1949	1,067	428	0.47	1.18	273	74	0.08	0.30	1,340	502	0.56	1.48
1950	1,289	356	0.39	1.42	243	56	0.06	0.27	1,532	412	0.45	1.69
1951	1,179	321	0.36	1.31	212	48	0.05	0.24	1,391	369	0.41	1.55
1952	1,038	222	0.25	1.15	167	26	0.03	0.19	1,205	248	0.28	1.34
1953	917	221	0.24	1.01	144	24	0.03	0.16	1,061	245	0.27	1.17
1954	810	176	0.19	0.89	133	15	0.02	0.15	943	191	0.21	1.04
1955	707	162	0.18	0.77	115	22	0.02	0.13	822	184	0.20	0.90
1956	684	105	0.11	0.74	106	11	0.01	0.12	790	116	0.13	0.86
1957	632	125	0.13	0.68	107	11	0.01	0.12	739	136	0.15	0.80
1958	595	101	0.11	0.64	91	15	0.02	0.10	686	116	0.12	0.73
1959	480	94	0.10	0.51	77	8	0.01	0.08	557	102	0.11	0.59
1960	474	90	0.09	0.50	65	7	0.01	0.07	539	97	0.10	0.57
1961	418	74	0.08	0.44	74	3	0.003	0.08	492	77	0.08	0.52
1962	425	55	0.06	0.44	61	4	0.004	0.06	486	59	0.06	0.50
1963	352	54	0.06	0.36	58	5	0.005	0.06	410	59	0.06	0.42
1964	322	60	0.06	0.33	65	4	0.004	0.07	387	64	0.07	0.40
1965	257	68	0.07	0.26	49	6	0.006	0.05	306	74	0.08	0.31
1966	297	78	0.08	0.30	35	6	0.006	0.04	332	84	0.09	0.34
1967	286	53	0.06	0.30	27	6	0.006	0.03	313	59	0.06	0.34

*Rates per 1,000 population.

TABLE 15.
ADMINISTRATIVE COUNTY OF DURHAM.
TUBERCULOSIS—New Cases and Deaths, 1938-1967.

Year.	New Cases.				Deaths.			
	Respiratory.		Non-Respiratory.		Respiratory.		Non-Respiratory.	
	M.	F.	M.	F.	M.	F.	M.	F.
1938	339	317	302	293	270	200	57	67
1939	410	295	266	254	292	217	67	54
1940	380	291	226	248	290	236	45	37
1941	388	382	241	240	299	243	55	51
1942	367	390	248	244	245	190	68	55
1943	438	398	240	290	296	218	64	26
1944	445	469	235	246	233	190	51	49
1945	527	386	249	265	255	203	48	56
1946	604	447	202	183	231	199	64	47
1947	534	474	166	172	253	263	58	38
1948	595	532	146	149	200	236	58	34
1949	552	515	127	146	240	188	39	35
1950	682	607	113	130	220	136	34	22
1951	654	525	102	110	195	126	26	22
1952	562	476	70	97	138	84	13	13
1953	502	415	66	78	129	92	14	10
1954	449	361	68	65	120	56	11	4
1955	376	331	54	61	108	54	9	13
1956	367	317	54	52	77	28	5	6
1957	368	264	42	65	96	29	7	4
1958	371	224	39	52	74	27	12	3
1959	289	191	32	45	74	20	7	1
1960	300	174	28	37	63	27	3	4
1961	257	161	37	37	57	17	2	1
1962	259	166	25	36	48	7	3	1
1963	222	130	27	31	44	10	4	1
1964	216	106	33	32	49	11	3	1
1965	158	99	19	30	56	12	4	2
1966	201	96	16	19	61	17	4	2
1967	189	97	10	17	40	13	4	2

TABLE 16.
ADMINISTRATIVE COUNTY OF DURHAM, 1967.
Numbers of Venereal Diseases patients treated for the first time.

	Treatment Centres.								Total.
	Stockton and Thor'by Hosp.	New- castle General Hosp.	South Shields Clinic.	Royal Infir. Sunder- land.	St. Hilda's Hospital Hartle- pool.	Memorial Hospital Dar- lington.	General Hospital Middles- brough.		
Syphilis	1	6	1	3	—	1	—	—	12
Gonorrhoea	26	82	27	59	5	14	15	228	
Other Conditions ...	90	334	68	273	18	56	56	895	
Totals	117	422	96	335	23	71	71	1135	

TABLE 17.

ADMINISTRATIVE COUNTY OF DURHAM, 1967—Deaths from cancer showing the organs affected, sex and age periods.

Based on local tabulations extracted from Monthly Returns submitted by District Registrars.

District.	Deaths at subjoined ages.							Buccal Cavity and Pharynx		Digestive Organs and Peritoneum		Respiratory System		Uterus		Other Female Genital Organs		Breast		Male Genital Organs		Urinary Organs		Skin (Scrotum excepted)		Brain and other parts of the Nervous System		Other or Unspecified Organs		TOTALS				
	0- 25	25- 45	45- 65	65- 75	75 & Up	M.	F.																											
AREA No. 1. Blaydon U.D. Ryton U.D. ... Whickham U.D. ...	—	—	5	23	19	18	2	—	—	12	13	17	5	—	—	1	3	1	3	1	2	1	1	—	—	2	1	4	3	40	25			
Jarrow M.B. ... Felling U.D. Hebburn U.D. ...	—	2	1	27	14	13	—	—	—	14	11	15	1	—	—	3	2	2	2	1	2	1	1	—	—	1	2	5	5	17	18			
33	3	24	20	14	1	—	—	12	11	11	5	2	2	—	—	2	2	2	2	1	2	1	1	—	—	1	2	4	5	33	28			
AREA No. 2. Jarrow M.B. ... Felling U.D. Hebburn U.D. ...	2	1	27	14	13	—	—	—	—	14	11	15	1	—	—	3	2	2	2	1	2	1	1	—	—	1	2	3	5	37	20			
37	2	32	27	20	—	—	2	—	22	9	25	6	—	—	4	4	2	2	2	2	—	—	1	—	1	1	1	5	54	27	41	26		
1	3	24	21	18	2	—	—	11	9	20	2	3	3	—	—	4	2	2	2	1	2	1	1	—	—	1	1	3	2	3	2			
AREA No. 3. Consett U.D. Stanley U.D. ... Lanchester R.D. ...	—	—	4	32	31	22	2	1	—	12	26	20	5	2	3	—	5	4	1	2	1	1	—	—	1	—	4	3	43	46	7	46		
3	1	12	8	8	—	—	—	—	24	17	21	6	5	3	—	8	1	—	—	2	—	—	1	—	1	1	3	5	21	11	21	11		
AREA No. 4. Chester-le-Street U.D. Chester-le-Street R.D. ...	1	3	16	13	14	—	—	—	9	10	8	3	1	2	—	7	4	2	1	—	6	—	—	1	—	3	2	2	2	20	27	53	37	
1	3	40	21	25	1	—	—	11	20	25	4	2	3	—	—	4	2	2	2	1	1	—	—	1	3	1	5	2	2	20	27	53	37	
AREA No. 5. Boldon U.D. Hetton U.D. Houghton-le-Spring U.D. ... Seaham U.D. Washington U.D. ...	1	1	19	9	12	—	—	—	9	8	6	4	1	1	—	3	2	2	2	1	1	—	—	1	—	2	2	2	2	22	20	20	16	
1	4	28	25	12	3	—	—	14	17	15	3	3	3	3	—	3	1	1	—	1	1	—	—	1	2	2	3	37	33	1	2	3	28	
2	1	22	19	12	—	—	2	10	11	9	6	1	1	2	—	1	1	1	1	2	2	1	—	1	1	1	2	2	3	27	28	27	28	
AREA No. 6. Crook & Willington U.D. ... Tow Law U.D. Weardale R.D. ...	—	—	16	18	17	—	—	—	13	13	10	—	1	1	—	6	—	—	—	—	—	—	—	—	1	2	—	1	3	26	25	4	3	
—	1	13	7	6	—	—	1	6	6	7	—	1	1	—	2	—	—	—	—	—	—	—	—	1	—	2	—	1	5	15	12	15	12	
AREA No. 7. Durham M.B. Brandon & Byshottles U.D. ... Durham R.D. ...	1	2	15	22	9	1	1	7	10	14	1	—	—	—	—	1	—	3	1	—	—	—	—	1	1	1	4	3	30	19	—	—		
—	1	17	13	13	5	—	—	15	10	13	1	2	2	3	—	4	—	5	1	—	—	—	—	2	2	—	4	16	27	34	34	27	27	
AREA No. 8. Barnard Castle U.D. Barnard Castle R.D. ...	—	—	1	3	3	—	—	2	1	—	7	12	19	2	4	1	—	8	9	—	1	1	—	—	—	—	1	2	—	3	4	17		
2	—	17	7	10	—	—	7	6	7	—	1	2	—	—	—	1	2	1	2	1	—	—	—	—	1	2	7	19	3	4				
AREA No. 9. Bishop Auckland U.D. Shildon U.D. ... Spennymoor U.D. ...	1	6	31	21	20	2	1	7	12	19	2	4	1	—	—	8	9	—	1	1	—	—	—	—	1	—	8	3	46	33	20	11		
2	2	8	15	4	1	—	—	7	4	11	1	—	—	3	—	3	4	—	1	1	—	—	—	—	1	—	2	2	27	18	27	18	27	18
AREA No. 10. Billingham U.D. ... Darlington R.D. ... Sedgefield R.D. Stockton R.D. ...	—	3	31	17	13	1	—	11	12	16	3	2	2	—	—	5	1	2	1	—	—	—	—	1	1	4	2	36	28	21	16	42	30	
1	5	20	4	7	1	1	5	8	11	1	1	1	1	—	3	4	—	1	1	—	—	—	—	1	—	2	2	5	10	42	30	5	10	
5	23	24	20	20	—	1	18	9	15	3	3	3	3	—	9	4	2	—	—	—	—	—	—	1	—	4	2	—	5	10	42	30	5	10
Easington R.D. ...	2	10	61	56	31	1	—	37	26	37	4	3	8	—	14	7	3	3	—	—	—	—	—	3	3	7	4	95	65	—	—	—	—	
Stockton M.B. ...	3	6	70	55	50	2	—	44	35	34	10	7	6	1	12	6	8	3	1	—	—	—	2	7	6	103	81	—	—	—	—			
ADMINISTRATIVE COUNTY	28	89	743	619	470	21	10	399	366	427	84	54	63	1	131	66	53	23	4	9	29	21	87	101	1087	862	—	—	—	—				

TABLE 18.
CERVICAL CYTOLOGY—1967.

		No. of sessions during year	No. of smears taken	No. of repeat smears	No. of positive cases	No. of smears taken from persons resident outside admin. county
Billingham	...	29	599	6	2	5
Consett	...	27	812	102	5	5
County Hall, Durham	...	2	53	—	—	1
Crook	...	3	88	—	—	—
Hebburn	...	28	765	102	12	12
Houghton-le-Spring	...	23	577	8	2	13
Newton Aycliffe...	...	18	438	6	3	3
Post Office Savings Certificate Division, Durham	...	4	124	1	—	—
Seaham	...	21	704	9	4	10
Staindrop	...	2	47	—	—	—
Stanhope...	...	7	204	2	3	1
Stanley	...	1	30	—	3	—
Washington	...	16	417	35	6	1
Easington R.D.	...	32	791	80	4	3
Stockton M.B.	...	29	459	1	1	5
		242	6,108	352	45	59

TABLE 19.

MENTAL HEALTH SERVICE—HOSPITAL ADMISSIONS, 1967.

	HOSPITAL	SECTION 25 (Observation)	SECTION 26 (Treatment)	SECTION 29 (Emergency)	SECTION 39 (Leave Revoked)	SECTION 40 (Absence without leave)	SECTION 60 (Court cases)	SECTION 65 (Court case with restriction)	SECTION 135 (Court Order with Emergency)	INFORMAL	TEMPORARY (Cir. 5/52)
MENTALLY ILL	Cherry Knowle, Ryhope ...	9	2	14	—	1	—	—	—	8	—
	St. Georges, Morpeth ...	—	—	1	—	—	1	—	—	1	—
	South Shields General ...	—	—	—	—	—	—	—	—	8	—
	St. Mary's, Stannington ...	2	1	15	2	2	1	—	—	132	—
	St. Nicholas, Gosforth	58	1	20	—	—	—	—	—	140	—
	St. Hilda's, Hartlepool ...	1	—	6	—	—	—	—	—	2	—
	Winterton, Scadgefield ...	80	11	220	—	2	4	—	1	248	—
	St. Luke's, Middlesbro ...	—	—	2	—	—	—	—	—	1	—
	Rempton Hospital, Notts. ...	—	—	—	—	—	—	1	—	—	—
	TOTALS ...	150	15	278	2	5	6	1	1	540	—
MENTALLY SUB- NORMAL	Aycliffe ...	—	2	1	—	—	1	—	—	1	7
	Prudhoe and Monkton ...	—	—	—	—	—	1	—	—	13	120
	Northgate, Morpeth ...	—	—	1	—	—	—	—	—	1	—
TOTALS ...		—	2	2	—	—	2	—	—	15	127

TABLE 20.

ADMINISTRATIVE COUNTY OF DURHAM, 1967.

Numbers of all cases of infectious and other notifiable diseases originally notified, and of the final numbers according to sex and age after corrections subsequently made either by notifying medical practitioners or medical superintendents of hospitals.

Numbers originally notified	Scarlet fever		Whooping cough		Acute poliomyelitis				Measles (excluding rubella)		Diphtheria		Dysentery		Meningo-coccal infection			
					Paralytic		Non-paralytic											
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F		
Total (All Ages) ...	144	136	258	286	1	—	—	—	4,321	4,316	—	—	332	314	6	7		
Final numbers after correction																		
Under 1 year ...	—	—	18	17	—	—	—	—	173	204	—	—	14	9	4	3		
1— " ...	7	4	22	28	—	—	—	—	530	529	—	—	13	13	—	—		
2— " ...	5	4	44	43	—	—	—	—	655	624	—	—	18	11	—	2		
3— " ...	11	16	42	41	—	—	—	—	696	674	—	—	14	15	—	1		
4— " ...	16	17	47	38	—	—	—	—	597	602	—	—	14	13	—	—		
5—9 " ...	75	69	80	108	—	—	—	—	1,604	1,604	—	—	96	92	—	—		
10—14 " ...	22	18	3	5	—	—	—	—	49	47	—	—	21	26	1	1		
15—24 " ...	7	5	—	4	1	—	—	—	11	19	—	—	13	16	—	—		
25 and over ...	1	1	2	1	—	—	—	—	1	5	—	—	102	86	1	—		
Age unknown ...	—	1	—	—	—	—	—	—	3	6	—	—	3	4	—	—		
Total (All Ages) ...	144	135	258	285	1	—	—	—	4,319	4,314	—	—	308	285	6	7		
Numbers originally notified																		
Final numbers after correction	Acute pneumonia		Smallpox		Acute encephalitis				Enteric or Typhoid fever		Paratyphoid fevers		Erysipelas		Food poisoning			
					Infective		Post-infectious											
M	F		M	F		M	F		M	F		M	F		M	F		
Total (All Ages) ...	38	25		—	—		3	6		1	1		1	2		12	8	
Final numbers after correction																		
Under 5 years ...	8	3		—	—		—	—		—	—		—	—		2	1	
5—14 " ...	3	3		—	—		1	2		1	1		—	—		1	—	
15—44 " ...	8	4		—	—		2	3		—	—		—	—		5	3	
45—64 " ...	12	10		—	—		—	—		—	—		1	1		2	4	
65 and over ...	7	4		—	—		—	—		—	—		1	—		1	1	
Age unknown ...	1	2		—	—		—	—		—	—		—	—		—	1	
Total (All Ages) ...	39	26		—	—		3	5		1	1		1	2		12	8	
Numbers originally notified					Tuberculosis				Total of New Cases coming to the Knowledge of Medical Officers of Health otherwise than by Formal Notification.				Other notifiable diseases					
Final numbers after correction	Respiratory		Meninges & C.N.S.*		Other				M		F		Original		Final			
			M	F		M	F		M	F		M	F		M	F		
Total (All Ages) ...	191	97		—	4		10	13		1	—		—	—		—	—	
Final numbers after correction													Puerperal pyrexia					
Under 5 years ...	5	3		—	—		1	—		—	—		—	46		—	45	
5—14 years ...	4	5		—	2		—	—		—	—		—	—		—	—	
15—44 " ...	66	54		—	2		5	10		—	—		—	—		—	—	
45—64 " ...	86	26		—	—		2	1		—	—		—	—		—	—	
65 and over ...	38	9		—	—		1	—		—	—		—	—		—	—	
Age unknown ...	—	—		—	—		1	—		—	—		—	—		—	—	
Total (All Ages) ...	189	97		—	4		10	13		—	—		—	—		—	—	

* Central nervous system.

TABLE 21.

ADMINISTRATIVE COUNTY OF DURHAM, 1967.—Corrected Number of Infectious Diseases notified in each sanitary district.

DISTRICTS.	Est. Population 1967	Scarlet Fever	Whooping Cough	Measles	Acute Poliomyelitis		Tuberculosis		Diphtheria	Small-pox	Tuber- cculosis Other Forms.	Menin- gococ- cal Infec- tion	Acute Encephalitis		Dysent- ery	Oph- thalmia Neonatorum	Puer- peral Pyrexia	Pneu- monia	Para- Typhoid Fever	Enteric or Typhoid fever	Food Poisoning	Erysipelas	Malaria	Totals.																					
					Para- lytic	Non- Paralytic	Respira- tory	Men-inges & C.N.S.					Infective	Post-In- fectious																															
					M	F	M	F					M	F																															
AREA No. 1. Blaydon U.D.	..	31,880	6	2	10	12	147	138	—	—	—	—	8	4	—	—	—	—	50	68	—	—	3	—	2	2	1	224	232																
Ryton U.D.	..	14,700	1	—	10	3	121	106	—	—	—	—	1	—	—	—	—	—	1	1	—	—	—	—	—	—	—	134	110																
Whickham U.D.	..	27,890	4	3	7	11	103	90	—	—	—	—	6	2	—	—	—	—	20	17	—	—	1	—	—	1	2	142	127																
AREA No. 2. Jarrow M.B.	..	29,120	—	—	21	18	90	96	—	—	—	—	11	6	—	—	—	—	1	1	—	—	3	2	2	—	—	125	126																
Felling U.D.	..	38,870	—	2	13	15	148	153	—	—	—	—	9	8	—	3	—	—	3	4	—	—	—	1	2	—	—	175	191																
Hebburn U.D.	..	24,940	—	—	6	10	115	111	—	—	—	—	9	2	—	1	—	—	4	1	—	—	—	2	—	—	—	136	128																
AREA No. 3. Consett U.D.	..	37,500	8	4	4	6	165	168	—	—	—	—	8	4	—	—	—	—	75	83	—	—	1	—	1	1	1	264	269																
Stanley U.D.	..	44,690	9	14	5	6	118	136	—	—	—	—	8	4	—	—	—	—	66	54	1	—	1	2	—	—	1	213	217																
Lanchester R.D.	..	14,900	5	9	9	11	204	179	—	—	—	—	3	—	—	—	—	—	13	15	—	—	2	—	1	—	—	234	218																
AREA No. 4. Chester-le-Street U.D.	..	20,300	—	—	—	—	35	42	—	—	—	—	3	—	—	—	—	—	—	—	—	—	—	—	—	—	—	38	42																
Chester-le-Street R.D.	..	45,680	5	5	3	2	107	115	—	—	—	—	7	1	—	—	—	—	1	2	—	—	2	6	—	—	1	126	131																
AREA No. 5. Boldon U.D.	..	22,760	—	—	5	7	7	23	—	—	—	—	5	4	—	—	—	—	4	9	—	—	1	1	—	—	1	23	45																
Hetton U.D.	..	17,020	1	1	5	—	47	41	—	—	—	—	8	6	—	—	—	—	—	—	—	—	—	—	—	—	—	61	48																
Houghton-le-Spring U.D.	..	31,610	12	10	4	6	93	89	—	—	—	—	11	6	—	—	—	—	1	—	—	—	12	8	—	—	1	132	122																
Seaham U.D.	..	25,200	—	—	11	8	233	225	—	—	—	—	10	4	—	—	—	—	1	1	—	—	1	3	—	—	4	261	241																
Washington U.D.	..	20,050	2	3	5	3	42	46	—	—	—	—	6	—	—	—	—	—	1	1	—	—	1	—	—	—	—	57	54																
AREA No. 6. Crook & Willington U.D.	..	23,600	4	6	4	6	232	243	—	—	—	—	2	—	—	—	—	—	—	—	—	—	2	—	—	—	—	244	255																
Tow Law U.D.	..	2,830	—	—	1	—	45	54	—	—	—	—	—	—	—	—	—	—	—	—	—	3	2	—	—	—	49	56																	
Weardale R.D.	..	8,190	—	—	—	1	12	6	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	13	7																
AREA No. 7. Durham M.B.	..	24,410	—	1	6	13	94	100	—	—	—	—	5	4	—	—	—	—	1	2	1	—	2	—	—	—	1	110	121																
Brandon & Byshottles U.D.	..	18,900	3	1	11	14	77	58	—	—	—	—	2	1	—	—	—	—	1	—	—	—	2	—	—	—	1	93	76																
Durham R.D.	..	37,660	6	14	26	29	235	254	—	—	—	—	4	4	—	—	—	—	1	—	—	—	2	2	—	—	1	274	304																
AREA No. 8. Barnard Castle U.D.	..	5,410	1	—	4	8	28	19	—	—	—	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	33	29																
Barnard Castle R.D.	..	17,520	—	1	4	3	184	173	—	—	—	—	1	—	—	—	—	—	—	—	—	—	2	1	—	—	—	191	178																
AREA No. 9. Bishop Auckland U.D.	..	34,650	12	8	16	18	316	341	—	—	—	—	5	5	—	—	—	—	2	—	—	—	24	7	3	—	—	358	401																
Shildon U.D.	..	13,820	3	2	3	10	29	34	—	—	—	—	1	—	—	—	—	—	—	—	—	—	4	3	—	—	1	40	50																
Spennymoor U.D.	..	18,450	22	4	2	—	185	178	—	—	—	—	4	3	—	—	—	—	1	—	—	—	2	2	—	—	—	215	188																
AREA No. 10. Billingham U.D.	..	35,000	4	10	1	1	114	97	—	—	—	—	7	1	—	—	—	—	—	—	—	—	—	—	—	—	1	3	—	127	112														
Darlington R.D.	..	28,910	2	2	3	—	248	239	—	—	—	—	3	—	—	—	—	—	1	1	—	—	—	—	—	—	—	257	244																
Sedgefield R.D.	..	35,170	7	4	8	7	132	132	1	—	—	—	8	2	—	—	—	—	—	—	—	—	38	—	—	—	2	196	146																
Stockton R.D.	..	14,900	2	2	—	1	35	46	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	38	51																
Easington R.D.	..	86,230	11	15	35	39	283	311	—	—	—	—	13	10	—	—	—	—	2	—	—	—	6	2	—	—	—	1	2	1	—	357	391												
Stockton M.B.	..	83,660	14	12	16	17	295	271	—	—	—	—	20	13	—	—	—	—	2	1	—	—	2	—	1	—	1	2	—	—	360	329													
ADMINISTRATIVE COUNTY	..	936,480	144	135	258	285	4,319	4,314	1	—	—	—	189	97	—	4	—	—	10	13	6	7	3	5	1	1	308	285	1	—	45	39	26	—	2	1	2	7	10	12	8	1	—	5,300	5,239

TABLE 22.

ADMINISTRATIVE COUNTY OF DURHAM, 1967—Notifiable Diseases. Corrected number of Cases and Deaths.

Diseases.													Cases.	Deaths.
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...	...	279	—
Whooping Cough	...	...	...	...	...	...	...	...	...	...	...	...	543	—
Diphtheria	...	...	...	...	...	...	...	...	...	...	...	...	—	—
Measles	...	...	...	...	...	...	...	...	...	...	...	...	8,633	3
Pneumonia	...	...	...	...	...	...	...	...	...	...	...	...	65	469
Meningococcal Infection	...	...	...	...	...	...	...	...	...	...	...	...	13	4
Acute Poliomyelitis---														
Paralytic	...	...	...	...	...	...	...	...	...	...	...	...	1	—
Non-Paralytic	...	...	...	...	...	...	...	...	...	...	...	...	—	—
Ophthalmia Neonatorum	...	...	...	...	...	...	...	...	...	...	...	...	1	—
Puerperal Pyrexia	...	...	...	...	...	...	...	...	...	...	...	...	45	—
Smallpox	...	...	...	...	...	...	...	...	...	...	...	...	—	—
Para-Typhoid Fever	...	...	...	...	...	...	...	...	...	...	...	...	2	—
Enteric or Typhoid Fever	...	...	...	...	...	...	...	...	...	...	...	...	3	1
Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	20	—
Malaria	...	...	...	...	...	...	...	...	...	...	...	...	1	—

TABLE 23.

ADMINISTRATIVE COUNTY OF DURHAM—Corrected number of cases of certain Infectious Diseases notified, 1958-1967

	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967	Mean of 10 years.
Smallpox	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	762	686	400	274	145	241	636	522	339	279	428
Diphtheria	1	—	—	—	—	—	—	—	—	—	—
Enteric & Para-Typhoid Fevers	6	12	5	2	5	4	7	5	2	3	5
Puerperal Pyrexia	97	71	49	101	86	75	80	61	61	45	73
Erysipelas	37	55	40	30	20	22	35	22	16	20	30
TOTALS	903	824	494	407	256	342	758	610	418	347	536
Attack Rate per 1,000 Living ...	1.0	0.9	0.5	0.4	0.3	0.4	0.8	0.7	0.4	0.4	0.6

TABLE 24.

ADMINISTRATIVE COUNTY OF DURHAM—Deaths and Death-rate from the seven principal Infective Diseases, 1958-1967

	1958	1959	1960	1961	1962	1963	1964	1965	1966	1967	Mean of 10 years
Estimated Population	935,800	943,700	950,870	955,050	964,550	969,580	970,190	974,860	981,020	936,480	958,210
Smallpox	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever ...	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	—	—	—	—	—	—	—	—	—	—	—
Enteric Fever ...	—	—	—	—	—	—	—	—	—	1	—
Measles	—	2	—	—	—	—	—	2	1	3	1
Whooping Cough ...	—	1	—	1	—	—	1	1	—	—	—
Diarrhoea and Enteritis under 2 years ...	10	11	9	6	14	10	7	13	16	13	11
TOTAL DEATHS ...	10	14	9	7	14	10	8	16	17	17	12
Deaths per 1,000 Population ...	0.01	0.01	0.009	0.007	0.015	0.010	0.008	0.017	0.017	0.018	0.012

TABLE 25.

ADMINISTRATIVE COUNTY OF DURHAM, 1967.

Results of examination of samples of raw, pasteurised and sterilised milk collected by officers of the County Health Department.

	Methylene Blue Test.			Phosphatase Test			Biological Test for Tuberculosis, etc.			Turbidity Test			Colony Count			
	No. of samples taken	Passed	Failed	Inconclusive	% Passed	% Failed	No. of samples taken	Negative	Positive	Inconclusive	% Positive	Passed	Failed	% Failed	Satisfactory	Unsatisfactory
<i>Pasteurised Milk</i>																
(a) Dairies ...	194	190	4	—	2.06	194	—	—	—	—	—	—	—	—	—	
(b) Schools ...	224	208	5	—	2.23	223	—	—	—	—	—	—	—	—	—	
(c) Hospitals ...	56	54	—	—	54	—	—	—	—	—	—	—	—	—	—	
(d) Dealers ...	1,883	1,724	87	64	4.6	1,875	—	—	—	—	—	—	—	—	—	
	2,357	2,176	96	75	4.07	2,346	1	0.04	—	—	—	—	—	—	—	
<i>Untreated Milk</i>																
(a) Farms ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
(b) Dealers ...	1,242	998	133	110	10.7	—	—	—	—	—	—	—	—	—	—	
	1,242	998	133	110	10.7	—	—	—	—	—	—	—	—	—	—	
<i>Sterilised Milk</i> ...																
(a) Dairies ...	4	—	—	—	—	—	—	—	—	—	—	4	—	—	—	
(b) Dealers ...	702	—	—	—	—	—	—	—	—	—	—	699	1	—	—	
	706	—	—	—	—	—	—	—	—	—	—	703	1	—	—	
<i>Ultra-Heat Treated</i>																
TOTALS ...	4,307	3,174	229	185	5.3	2,346	1	0.04	382	361	11	10	2.88	703	1	0.14
														2	—	

N.B. The total of 4307 includes 13 samples of various designations for which no results were received, and this accounts for the discrepancies in the totals.

TABLE 26.

HOUSING.

Statement as to the position of Housing in the Administrative County of Durham on the 31st December, 1967
(Figures supplied by District Councils).

Districts.	Houses Erected during 1967 by			Total No. of Inhabited Houses in District.
	Local Authority	Any Other Housing Authority.	Private Persons.	
<i>Area No. 1.</i>				
Blaydon U.D.	201	—	90	10,911
Ryton U.D.	22	—	63	5,304
Whickham U.D.	64	—	106	9,606
<i>Area No. 2.</i>				
Jarrow M.B.	133	—	30	9,408
Felling U.D.	24	—	76	12,433
Hebburn U.D.	512	2	—	8,335
<i>Area No. 3.</i>				
Consett U.D.	53	—	30	12,244
Stanley U.D.	197	—	23	14,816
Lanchester R.D.	—	—	71	4,790
<i>Area No. 4.</i>				
Chester-le-Street U.D.	30	—	143	7,177
Chester-le-Street R.D.	208	—	193	15,585
<i>Area No. 5.</i>				
Boldon U.D.	18	—	56	7,727
Hetton U.D.	59	—	78	5,681
Houghton-le-Spring U.D.	136	—	124	10,718
Seaham U.D.	72	4	2	8,042
Washington U.D.	278	—	79	6,761
<i>Area No. 6.</i>				
Crook and Willington U.D.	76	—	13	8,380
Tow Law U.D.	—	—	—	920
Weardale R.D.	44	—	8	3,299
<i>Area No. 7.</i>				
Durham M.B.	107	28	108	6,863
Brandon and Byshottles U.D.	70	—	7	6,362
Durham R.D.	88	—	345	12,696
<i>Area No. 8.</i>				
Barnard Castle U.D.	—	87	11	1,785
Barnard Castle R.D.	—	—	55	6,083
<i>Area No. 9.</i>				
Bishop Auckland U.D.	146	—	99	11,500
Shildon U.D.	67	—	7	4,766
Spennymoor U.D.	61	—	51	6,068
<i>Area No. 10.</i>				
Billingham U.D.	307	—	148	11,062
Darlington R.D.	30	363	153	8,973
Sedgefield R.D.	80	—	93	11,633
Stockton R.D.	2	216	259	5,047
Easington R.D.	142	56	38	28,603
Stockton M.B.	472	—	238	25,856
Total ...	3,699	756	2,797	309,434

TABLE 27.
CLOSET ACCOMMODATION.

The following table gives the number and type of convenience in each sanitary district of the county at the end of 1967. In addition information is given in the table as to the conversions of ashpit privies and ash-closets into water-closets during the year.

DISTRICTS.	Total number in District			Ashpit Privies converted into Water-Closets.	Ash Closets converted into Water-Closets
	Water-Closets	Ash-Closets	Ashpit Privies		
AREA No. 1.					
Blaydon U.D.	13,781	6	—	—	—
Ryton U.D.	5,473	4	12	—	—
Whickham U.D.	10,270	—	18	1	—
AREA No. 2.					
Jarrow M.B.	12,104	—	—	—	—
Felling U.D.	13,459	3	—	—	—
Hebburn U.D.	9,144	—	—	—	—
AREA No. 3.					
Consett U.D.	14,163	19	1	—	5
Stanley U.D.	16,179	36	—	2	4
Lanchester R.D.	5,013	57	29	—	—
AREA No. 4.					
Chester-le-Street U.D.	8,798	2	—	—	—
Chester-le-Street R.D.	15,565	20	—	—	—
AREA No. 5.					
Boldon U.D.	8,777	14	—	—	—
Hetton U.D.	5,880	—	—	—	—
Houghton-le-Spring U.D.	10,704	—	14	—	—
Seaham U.D.	9,783	—	1	—	—
Washington U.D.	7,953	—	3	—	—
AREA No. 6.					
Crook & Willington U.D.	9,218	221	—	—	5
Tow Law U.D.	830	159	—	—	10
Weardale R.D.	2,905	362	25	15	23
AREA No. 7.					
Durham M.B.	8,621	14	5	—	1
Brandon and Byshottles U.D.	6,741	191	5	—	3
Durham R.D.	18,424	139	10	—	—
AREA No. 8.					
Barnard Castle U.D.	2,461	3	1	—	—
Barnard Castle R.D.	5,520	645		34	—
AREA No. 9.					
Bishop Auckland U.D.	13,142	387	30	—	—
Shildon U.D.	5,213	—	58	1	—
Spennymoor U.D.	7,561	68	—	—	—
AREA No. 10.					
Billingham U.D.	12,083	4	1	—	—
Darlington R.D.	8,810	163		9	—
Sedgefield R.D.	14,167	70	—	—	—
Stockton R.D.	5,224	19	—	—	—
Easington R.D.	29,955	95	68	—	2
Stockton M.B.	32,050	—	—	—	—

PART III

STATISTICAL TABLES

B. SCHOOL HEALTH SERVICE

TABLE 28

MINISTRY OF EDUCATION TABLES RELATING TO THE INSPECTION AND TREATMENT OF PUPILS IN THE ADMINISTRATIVE COUNTY AREA EXCLUDING THE EXCEPTED DIVISIONS OF EASINGTON AND STOCKTON-ON-TEES.

Number of Pupils on registers of maintained and assisted nursery, primary, secondary and special schools in January, 1968 131,583

PART I.

**MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS
(INCLUDING NURSERY AND SPECIAL SCHOOLS).**

Periodic Medical Inspections.

Age Groups Inspected (by year of birth).	Number of Pupils Inspected.	Physical Condition of Pupils Inspected.	
		Satisfactory.	Unsatisfactory.
		No.	No.
1963 and later	303	296	7
1962	3,817	3,789	28
1961	6,052	5,991	61
1960	1,964	1,950	14
1959	529	521	8
1958	538	531	7
1957	1,684	1,665	19
1956	3,448	3,429	19
1955	2,375	2,358	17
1954	935	929	6
1953	1,772	1,758	14
1952 and earlier	5,016	4,993	23
Total	28,433	28,210	223

Other Inspections.

Notes :— A special inspection is one that is carried out at the special request of a parent, doctor, nurse, teacher or other person.

A re-inspection is an inspection arising out of one of the periodic medical inspections or out of a special inspection.

Infestation with Vermin.

Notes :—All cases of infestation, however slight, are included.

PART II.

DEFECTS FOUND BY PERIODIC AND SPECIAL MEDICAL INSPECTIONS DURING THE YEAR.

Note: (T) Number of pupils found to need treatment.
(O) Number of pupils found to need observation.

Defect or Disease.	Periodic Inspections.								Special Inspections.		
	Entrants.		Leavers.		Others.		Total.				
	(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)	
Skin	319	162	239	75	244	82	802	319	34	15	
Eyes—	...										
(a) Vision	992	671	1013	399	1,177	572	3,182	1,642	538	489	
(b) Squint	379	84	54	34	151	72	584	190	73	76	
(c) Other	63	23	29	14	50	20	142	57	8	9	
Ears—											
(a) Hearing	304	361	33	40	133	92	470	493	77	62	
(b) Otitis Media	85	170	16	27	43	61	144	258	21	16	
(c) Other	22	25	16	9	17	16	55	50	9	6	
Nose and Throat	...	412	904	54	129	225	233	691	1,266	45	88
Speech	...	85	278	4	21	38	29	127	328	32	51
Lymphatic Glands		18	189	2	7	8	24	28	220	1	15
Heart	...	60	146	21	31	25	62	106	239	8	35
Lungs	...	175	293	37	52	119	110	331	455	22	45
Developmental—											
(a) Hernia	36	33	11	—	17	3	64	36	4	4	
(b) Other	35	195	30	41	56	99	121	335	28	36	
Orthopaedic—											
(a) Posture	4	18	4	35	5	46	13	99	—	6	
(b) Feet	60	110	26	87	47	116	133	313	10	19	
(c) Other	68	111	35	49	67	62	170	222	14	38	
Nervous System—											
(a) Epilepsy	22	11	8	6	15	9	45	26	7	3	
(b) Other	61	101	18	20	33	37	112	158	11	15	
Psychological—											
(a) Development	36	88	11	28	37	71	84	187	55	44	
(b) Stability	24	157	5	11	18	57	47	225	16	37	
Abdomen	...	48	37	16	14	38	34	102	85	8	10
Other	...	63	64	46	35	82	62	191	161	20	17

PART III.

TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS).

NOTES :—This part of the return gives the total numbers of :—

- (i) cases treated or under treatment during the year by members of the Authority's own staff ;
- (ii) cases treated or under treatment during the year in the Authority's school clinics under National Health Service arrangements with the Regional Hospital Board ; and
- (iii) cases known to the Authority to have been treated or under treatment elsewhere during the year.

Eye Diseases, Defective Vision and Squint.

					Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	...	...	...	...	636
Errors of refraction (including squint)	...	...	...	...	13,565
				Total	14,201
Number of pupils for whom spectacles were prescribed	...	...	...	...	10,446

Diseases and Defects of Ear, Nose and Throat.

					Number of cases known to have been dealt with
Received operative treatment :—					
(a) for diseases of the ear	...	...	...	...	24
(b) for adenoids and chronic tonsillitis	...	...	...	...	924
(c) for other nose and throat conditions	...	...	...	...	32
Received other forms of treatment	...	...	...	...	265
				Total	1,245
Total number of pupils in schools who are known to have been provided with hearing aids :—					
(a) in 1967 (see note (i) below)	...	...	...	...	16
(b) in previous years (see note (ii) below)	...	...	...	...	131

(i) A pupil recorded under (a) above is not recorded at (b) in respect of the supply of a hearing aid in a previous year.

(ii) The number entered in (b) does not include children who have left school.

Orthopaedic and Postural Defects.

				Number of cases known to have been treated
(a) Pupils treated at clinics or out-patients departments	...	...	...	265
(b) Pupils treated at school for postural defects	...	...	...	—
			Total	265

Diseases of the Skin.

(excluding uncleanliness, for which see Table 28 of Part I).

									Number of cases known to have been treated
Ringworm—(a) Scalp	...	...	...	...	...	...	...	...	—
(b) Body	...	...	...	...	...	...	...	...	1
Scabies ...	...	...	...	...	...	...	...	...	22
Impetigo ...	...	...	...	...	...	...	...	...	23
Other skin diseases ...	...	...	...	...	...	...	...	...	748
	Total								794

Child Guidance Treatment.

									Number of cases known to have been treated.
Pupils treated at Child Guidance Clinics ...	...	...	...	...	...	...	...	...	319

Speech Therapy.

									Number of cases known to have been treated.
Pupils treated by speech therapists ...	...	...	...	...	...	...	...	...	665

Other Treatment given.

									Number of cases known to have been dealt with.
(a) Pupils with minor ailments ...	...	...	...	...	...	...	...	...	1,858
(b) Pupils who received convalescent treatment under School Health Service arrangements ...	...	...	...	...	...	...	...	...	—
(c) Pupils who received B.C.G. vaccination ...	...	...	...	...	...	...	...	...	7,676
(d) Other than (a) (b) and (c) above									
Orthoptic ...	...	...	...	...	...	...	...	...	202
U.V.R. ...	...	...	...	...	...	...	...	...	102
	Total								9,838

PART IV.

RETURN OF DEFECTS FOUND AT MEDICAL INSPECTION, 1967.

Defects of :—	Requiring Treatment.						Requiring Observation.					
	Total Number of Periodic Inspections. 1966—32,174 1967—28,433		Total Number of Special Inspections. 1966— 8,803 1967— 8,095		Total Number of Defects	Total Number of Periodic Inspections. 1966—32,174 1967—28,433		Total Number of Special Inspections. 1966— 8,803 1967— 8,095		Total Number of Defects.		
	Number of Defects		Number of Defects			Number of Defects.		Number of Defects.				
	1967	1966	1967	1966	1967	1966	1967	1966	1967	1966	1967	1966
Skin	802	792	34	35	836	827	319	395	15	26	334	421
Eyes :—												
(a) Vision	3,182	3,323	538	584	3,720	3,907	1,642	1,897	489	413	2,131	2,310
(b) Squint	584	663	73	66	657	729	190	238	76	59	266	297
(c) Other	142	140	8	16	150	156	57	65	9	10	66	75
Ears :—												
(a) Hearing	470	382	77	58	547	440	493	489	62	58	555	547
(b) Otitis Media	144	214	21	9	165	223	258	353	16	22	274	375
(c) Other	55	92	9	6	64	98	50	95	6	7	56	102
Nose and Throat	691	641	45	41	736	682	1,266	1,510	88	122	1,354	1,632
Speech	127	173	32	32	159	205	328	348	51	52	379	400
Lymphatic Glands	28	25	1	2	29	27	220	324	15	19	235	343
Heart	106	114	8	16	114	130	239	296	35	50	274	346
Lungs	331	297	22	25	353	322	455	596	45	58	500	654
Developmental :—												
(a) Hernia	64	76	4	2	68	78	36	49	4	5	40	54
(b) Other	121	182	28	17	149	199	335	413	36	34	371	447
Orthopaedic :—												
(a) Posture	13	9	—	1	13	10	99	86	6	8	105	94
(b) Feet	133	135	10	9	143	144	313	380	19	19	332	399
(c) Other	170	195	14	15	184	210	222	253	38	33	260	286
Nervous System :—												
(a) Epilepsy	45	72	7	16	52	88	26	39	3	9	29	48
(b) Other	112	110	11	7	123	117	158	146	15	15	173	161
Psychological :—												
(a) Development	84	92	55	42	139	134	187	238	44	54	231	292
(b) Stability	47	44	16	21	63	65	225	279	37	44	262	323
Abdomen	102	83	8	16	110	99	85	101	10	20	95	121
Other Defects or Diseases ...	191	287	20	26	211	313	161	266	17	22	178	288
Totals ...	7,744	8,141	1,041	1,062	8,785	9,203	7,364	8,856	1,136	1,159	8,500	10,015

PART V.

DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY, 1967 (excluding Easington and Stockton-on-Tees).

(1) Attendances and Treatment.

First Visit	...	...	...	...	...	...	...	...	...	...	...	16,794
Subsequent Visits	...	...	...	...	...	...	...	...	...	...	...	26,438
Additional courses of treatment commenced	...	...	...	...	...	...	...	...	...	...	...	1,241
Fillings :—												
Permanent Teeth	...	...	...	...	...	...	...	...	...	...	...	26,739
Deciduous Teeth	...	...	...	...	...	...	...	...	...	...	...	9,437
Number of Teeth Filled :—												
Permanent Teeth	...	...	...	...	...	...	...	...	...	...	...	22,369
Deciduous Teeth	...	...	...	...	...	...	...	...	...	...	...	8,445
Extractions :—												
Permanent Teeth	...	...	...	...	...	...	...	...	...	...	...	4,282
Deciduous Teeth	...	...	...	...	...	...	...	...	...	...	...	15,243
Administration of General Anaesthetics												
Emergencies	...	...	...	...	...	...	...	...	...	...	...	721
Other Operations :—												
Number of Pupils X-rayed	...	...	...	...	...	...	...	...	...	...	...	687
Prophylaxis	...	...	...	...	...	...	...	...	...	...	...	3,867
Teeth otherwise conserved	...	...	...	...	...	...	...	...	...	...	...	3,001
Number of Teeth root filled	...	...	...	...	...	...	...	...	...	...	...	45
Inlays	...	...	...	...	...	...	...	...	...	...	...	—
Crowns	...	...	...	...	...	...	...	...	...	...	...	—
Courses of treatment completed	...	...	...	...	...	...	...	...	...	...	...	14,629

(2) Orthodontic Work.

Cases remaining from previous year	...	...	...	...	...	...	...	...	...	...	...	1,227
New Cases commenced during the year	...	...	...	...	...	...	...	...	...	...	...	348
Cases completed during year	...	...	...	...	...	...	...	...	...	...	...	154
Cases discontinued during year	...	...	...	...	...	...	...	...	...	...	...	45
No. of removable appliances fitted	...	...	...	...	...	...	...	...	...	...	...	279
No. of fixed appliances fitted	...	...	...	...	...	...	...	...	...	...	...	17
Pupils referred to Hospital Consultant	...	...	...	...	...	...	...	...	...	...	...	110

(3) Prosthetic Work.

Pupils supplied with Full Upper or Full Lower (First time)	...	...	...	...	...	...	...	...	...	...	...	10
Pupils supplied with other dentures (First time)	...	...	...	...	...	...	...	...	...	...	...	79
Number of Dentures supplied	...	...	...	...	...	...	...	...	...	...	...	82

(4) Anaesthetics.

General Anaesthetics administered by Dental Officers	21
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(5) *Inspections.*

(a)	First Inspection at school. Number of Pupils	21,705
(b)	First Inspection at clinic. Number of Pupils	4,405
	Number of (a) + (b) found to require treatment	...	...	...	...	...	...	14,145
	Number of (a) + (b) offered treatment	...	...	...	...	...	...	13,887
(c)	Pupils re-inspected at school or clinic	...	...	...	...	...	...	21,400
	Number of (c) found to require treatment	...	...	...	...	...	...	12,907

(6) *Sessions.*

Sessions devoted to treatment	...	...	...	...	...	...	...	8,323.5
Sessions devoted to inspection	...	...	...	...	...	...	...	460.4
Sessions devoted to Dental Health Education	...	...	...	...	...	...	...	308.5

TABLE 29

PERMANENT SCHOOL CLINICS

(Services available 31st December, 1967).

Clinic.	Sessions.				Sessions.			
BILLINGHAM. Queensway.	Medical Officer	... Tues. (a.m.), Fri.	Oculist	... ...	Mon. (noon).			
	Minor Ailments	... Tues. (a.m.), Fri. (a.m.)	Speech Therapist		Tues., Thurs.			
	Dental Officer	... { Surgery No. 1, Daily. { Surgery No. 2, Daily.	Educational Psychologist	... By arrangement.				
			Audiometrist	... By arrangement.				
Building used by Maternity and Child Welfare and School Health Service.								
BIRTLEY. Hexham Villa.	Medical Officer	... Tues.	Oculist	... ...	Alternate Fridays.			
	Minor Ailments	... Tues. (a.m.)	Educational Psychologist.		By arrangement.			
	Dental Officer	... Daily.	Audiometrist	... By arrangement.				
	Building used by Maternity and Child Welfare and School Health Service.							
BISHOP AUCKLAND. 23, Etherley Lane.	Medical Officer	... Mon. (a.m.), Thurs.						
	Minor Ailments	... Mon. (a.m.), Thurs.	Educational Psychologist.	... By arrangement.				
	Dental Officer	... Thurs.						
	Oculist	... ... Tues. (p.m.), Fri. (a.m.)	Audiometrist	... By arrangement.				
	Building used by School Health Service.							
BLAYDON. Shibdon Road.	Medical Officer	... Tues. (a.m.), Fri. (a.m.)	Oculist	... ...	Alt. Wed. (p.m.).			
	Minor Ailments	... Tues. (a.m.), Fri. (a.m.)	Educational Psychologist.		By arrangement.			
	U.V.R. Lamp	... By arrangement.	Audiometrist	... By arrangement.				
	Dental Officer	... Daily.						
	Building used by Maternity and Child Welfare and School Health Service.							
CHESTER-LE- STREET. Mains Farm House, West Lane.	Medical Officer	... Fri. (a.m.).	Minor Ailments	... Fri. (a.m.).				
	Building used by Maternity and Child Welfare and School Health Service.							
CONSETT. 192 Medomsley Road.	Medical Officer	... Fri. (p.m.)	Oculist		Friday (a.m.)			
	Minor Ailments	... Fri. (p.m.).	Educational Psychologist.		By arrangement.			
	Dental Officer	... Daily.	Audiometrist	... By arrangement.				
	Building used by Maternity and Child Welfare and School Health Service.							
CROOK. Dawson Street.	Medical Officer	... Wed.	Educational Psychologist.		By arrangement.			
	Minor Ailments	... Wed. (a.m.)	Audiometrist	... By arrangement.				
	U.V.R. Lamp	... By arrangement.						
	Dental Officer	... Mon. (a.m.)						
	Building used by School Health Service.							

Clinic.	Sessions.				Sessions.			
DURHAM. Musgrave Gardens.	Medical Officer ...	Mon. (a.m.), Thurs.				Speech Therapist ...	Mon., Tues., Wed., Thurs. (p.m.),	
Building used by Maternity and Child Welfare and School Health Service.								
FELLING. Heworth.	Minor Ailments ...	Mon. (a.m.), Thurs. (a.m.).				Audiometristian ...	By arrangement.	
Building used by School Health Service.								
HEBBURN. Argyle Street.	U.V.R. Lamp ...	By arrangement.				Oculist ...	Fri. (p.m.)	
Building used by Maternity and Child Welfare and School Health Service.								
HOUGHTON- LE-SPRING. Lambton House, Gasworks Lane.	Dental Officer ...	Daily.				Educational Psychologist.	By arrangement.	
Building used by Maternity and Child Welfare and School Health Service.								
JARROW. "Balgownie," Bede Burn Road.	Medical Officer ...	Tues. (a.m.), Fri.				Oculist ...	Thurs. (a.m.).	
Building used by School Health Service.								
NEWTON AYCLIFFE. Dalton Way.	Minor Ailments ...	Tues. (a.m.), Fri. (a.m.).				Audiometristian ...	By arrangement.	
Building used by Maternity and Child Welfare and School Health Service.								
RYTON. Grange Road.	Dental Officer ...	Daily.				Educational Psychologist	By arrangement.	
Building used by Maternity and Child Welfare and School Health Service.								
SEAHAM HARBOUR St. John's Square.	Medical Officer ...	Mon., Tues., Wed., Thurs. (p.m.).				U.V.R. Lamp ...	By arrangement.	
Building used by Maternity and Child Welfare and School Health Service.								

<i>Clinic.</i>	<i>Sessions.</i>		<i>Sessions.</i>	
SHILDON. Hallgarth House, Main Street.	Medical Officer ... Fri.		Educational Psychologist.	By arrangement.
	Minor Ailments ... Fri. (a.m.).		Audiometrician ...	By arrangement.
	Building used by School Health Service.			
SPENNYMOOR. Cheapside.	Medical Officer ... Mon. (a.m.), Thurs.		Educational Psychologist.	By arrangement.
	Minor Ailments ... Mon. (a.m.), Thurs. (a.m.).		Audiometrician ...	By arrangement.
	Building used by Maternity and Child Welfare and School Health Service.			
SPENNYMOOR. Rock Road.	Dental Officer ... Mon.			
	Building used by School Health Service.			
STANLEY. High Street.	Medical Officer ... Mon. (a.m.), Tues. (a.m.) Thurs. (a.m.)		Oculist ...	... Alt. Fridays.
	Minor Ailments ... Mon. (a.m.), Tues. (a.m.) Thurs. (a.m.).			
	U.V.R. Lamp ... By arrangement.		Educational Psychologist.	By arrangement.
	Dental Officer ... Daily.		Audiometrician ...	By arrangement.
	Building used by School Health Service.			
WASHINGTON Victoria Road.	Medical Officer ... Mon. (a.m.)		Oculist ...	... Fri. (p.m.)
	Minor Ailments ... Mon. (a.m.)		Educational Psychologist.	By arrangement.
	Dental Officer ... Mon. (a.m.), Wed. (a.m.), Thurs., Fri. (a.m.)		Audiometrician ...	By arrangement.
	Building used by Maternity and Child Welfare and School Health Service.			

TEMPORARY SCHOOL CLINICS.

(Services available 31st December, 1967).

<i>Clinic.</i>	<i>Sessions.</i>		<i>Sessions.</i>	
BARNARD CASTLE. Methodist Schoolroom.	Medical Officer ... Wed. (a.m.) 1st and 3rd weeks in month.		Audiometrician ...	By arrangement.
	Minor Ailments ... Wed. (a.m.) 1st and 3rd weeks in month.			
	Building used by Maternity and Child Welfare and School Health Service.			
BUTTERKNOWLE. County Mixed School.	Minor Ailments ... Tues. (a.m.).			
	Building used by School Health Service.			
EVENWOOD. C.E. Mixed School.	Minor Ailments ... Tues. (p.m.).			
	Building used by School Health Service.			
WITTON PARK. County Mixed School.	Minor Ailments ... Tues. (a.m.), Fri. (a.m.).			
	Building used by School Health Service.			

MOBILE DENTAL VANS.

No. 1	Headquarters	... Wolsingham	... ...	Daily
No. 2	"	... Barnard Castle	... ...	Daily
No. 3	"	... Sedgefield	... ...	Daily
No. 4	"	... Boldon Colliery	... ...	Daily
No. 5	"	... Chester-le-Street	... ...	Daily
No. 6	"	... Brandon	... ...	Daily
No. 7	"	... Stillington	... ...	Daily
No. 8	"	... Birtley	... ...	Daily

CHILD GUIDANCE.

(Services available 31st December, 1967).

<i>Place.</i>	<i>Sessions.</i>		<i>Sessions.</i>	
BISHOP AUCKLAND CLINIC. 23, Etherley Lane.	Educational Psychologist	By arrangement. Building used by School Health Service.	Psychiatrist	... Wed. (a.m.)
DURHAM CHILD GUIDANCE CLINIC. Aykley Heads, Durham.	Educational Psychologist.	Mon. Building used by School Health Service.	Psychiatrist	... Mon.-Thurs. (a.m. only).
JARROW CLINIC. Balgownie, Bede Burn Road.	Educational Psychologist.	Tues. & Wed. Also by arrangement. Building used by School Health Service.	Psychiatrist	... Wed.
SEAHAM CLINIC. St. John's Square.	Educational Psychologist.	By arrangement. Building used by School Health Service.		

TABLE 30

ANALYSIS OF CASES EXAMINED AT THE SCHOOL CLINICS DURING THE YEAR 1967.

	Defect or Disease.								No. of Cases.	No. of Examinations.
1. Cleanliness	...	...	...	...	...	...	...	...	12	26
2. Infestation	—Head	...	...	...	...	...	...	...	90	469
	—Body	...	...	...	...	...	...	...	—	5
3. Teeth	...	...	...	...	...	...	...	...	13	14
4. Skin—	(a) Ringworm of Scalp	...	...	...	...	...	...	...	3	8
	(b) Ringworm of Body	...	...	...	...	...	...	...	2	2
	(c) Other	...	...	...	...	...	...	...	645	1,971
5. Eyes—	(a) Vision	...	...	...	...	...	...	...	670	897
	(b) Squint	...	...	...	...	...	...	...	39	59
	(c) Other	...	...	...	...	...	...	...	322	496
6. Ears—	(a) Hearing	...	...	...	...	...	...	...	1,978	3,404
	(b) Otitis Media	—R	...	...	...	...	...	...	48	84
		—L	...	...	...	...	...	...	29	47
	(c) Other	...	...	...	...	...	...	...	163	307
7. Nose and Throat	...	...	...	...	...	...	...	...	273	467
8. Speech	...	...	...	...	...	...	...	...	70	85
9. Lymphatic Glands	...	...	...	...	...	...	...	...	9	14
10. Heart and Circulation	...	...	...	...	...	...	...	...	36	48
11. Lungs	...	...	...	...	...	...	...	...	119	283
12. Development—	(a) Hernia	...	...	...	...	...	...	...	2	1
	(b) Other	...	...	...	...	...	...	...	42	52
13. Orthopaedic—	(a) Posture	...	...	...	...	...	...	...	4	8
	(b) Feet	...	...	...	...	...	...	...	163	300
	(c) Other	...	...	...	...	...	...	...	98	144
14. Nervous System—	(a) Epilepsy	...	...	...	...	...	...	...	9	15
	(b) Other	...	...	...	...	...	...	...	211	533
15. Psychological—	(a) Development	...	...	...	...	...	...	...	43	69
	(b) Stability	...	...	...	...	...	...	...	132	268
16. General Debility	...	...	...	...	...	...	...	...	402	1,214
17. Abdomen	...	...	...	...	...	...	...	...	53	91
18. Other Defects	...	...	...	...	...	...	...	...	508	963
19. Special Cases	...	...	...	...	...	...	...	...	—	—
20. No appreciable Defect or Disease	...	...	...	...	...	...	...	...	169	205
Totals								...	6,357	12,549

NUMBER OF CASES TREATED AT THE SCHOOL CLINICS DURING THE YEAR, 1967.

Defect or Disease.										No. of Cases.	No. of Attendances.
Ringworm—Scalp ...	...	...	...	...	...	...	...	...	...	—	—
Ringworm—Body	...	...	...	...	...	...	...	...	...	1	2
Scabies	...	...	...	...	...	...	...	...	...	22	51
Impetigo	...	...	...	...	...	...	...	...	...	23	37
Other skin diseases	...	...	...	...	...	...	...	...	...	748	2,781
Minor Eye Defects (external and other but excluding errors of refraction and squint)	...	...	...	...	...	...	...	...	...	305	732
Refractions	...	...	...	...	...	...	...	...	...	3,255	3,255
Minor Ear Defects	...	...	...	...	...	...	...	...	...	161	498
Miscellaneous (e.g. minor injuries, bruises, sores, chilblains etc.)	...	...	...	...	...	...	...	...	...	1,858	5,478
Nose and Throat Conditions	...	...	...	...	...	...	...	...	...	81	162
Ultra Violet Ray	...	...	...	...	...	...	...	...	...	102	1,384
Totals										6,556	14,380

TABLE 31.

TUBERCULIN TESTING OF SCHOOL ENTRANTS—1967.

Area.	Sanitary Districts.	Number of Schools Visited.	Number of Children Skin Tested.	Positive Reactors.	Negative Reactors.	Number Absent at time of Skin Test.
1	Blaydon U.D. Ryton U.D. Whickham U.D.	12	282	6	276	27
2	Jarrow M.B. Felling U.D. Hebburn U.D.	22	1,074	23	1,051	133
3	Consett U.D. Stanley U.D. Lanchester R.D.	21	594	6	588	86
4	Chester-le-Street U.D. Chester-le-Street R.D.	18	953	7	946	106
5	Boldon U.D. Hetton U.D. Houghton U.D. Seaham U.D. Washington U.D.	21	1,260	11	1,249	117
6	Crook U.D. Tow Law U.D. Weardale R.D.	17	316	7	309	32
7	Durham M.B. Brandon U.D. Durham R.D.	19	913	10	903	95
8	Barnard Castle U.D. Barnard Castle R.D.	8	113	5	108	15
9	Bishop Auckland U.D. Shildon U.D. Spennymoor U.D.	23	1,036	6	1,030	102
10	Billingham U.D. Darlington R.D. Sedgefield R.D. Stockton R.D.	26	1,188	19	1,169	180
	Total	187	7,729	100 ≡ 1.39%	7,629	893

TABLE 32.

B.C.G. VACCINATION, 1967.

Area.	Sanitary District.	Month(s) Schemes Held in Schools.	Number Skin Tested.	Positive Reactors.		Negative Reactors given B.C.G.	Number absent at time of reading.	Negative reactors not vaccinated for medical reasons.
				Number	%			
1	Blaydon U.D.	October/November	556	61	11.0	472	16	7
	Ryton U.D.	November... ...	85	7	8.2	74	3	1
	Whickham U.D.	November... ...	240	37	15.4	195	7	1
2	Jarrow M.B.	October	543	86	15.8	437	20	—
	Felling U.D.	October/November	508	85	16.7	378	43	2
	Hebburn U.D.	November... ...	516	90	17.4	408	18	—
3	Consett U.D.	September	431	35	8.1	375	20	1
	Stanley U.D.	October/November	498	82	16.5	376	26	14
	Lanchester R.D.	November... ...	205	32	15.6	162	7	4
4	Chester-le-Street U.D.	October	218	36	16.5	176	3	3
	Chester-le-Street R.D.	October/November	465	82	17.6	342	21	20
5	Boldon U.D.	October	184	14	7.6	155	15	—
	Hetton U.D.	November... ...	111	14	12.6	91	6	—
	Houghton U.D.	November	359	38	10.6	304	17	—
	Seaham U.D.	October/November	444	37	8.3	377	28	2
	Washington U.D.	October	367	21	5.7	330	16	—
6	Crook U.D.	October/November	198	45	22.7	143	10	—
	Tow Law U.D.	—	—	—	—	—	—	—
	Weardale R.D.	November... ...	136	42	30.9	88	6	—
7	Durham M.B.	October/November	400	37	9.3	348	11	4
	Brandon U.D.	September/October	192	21	10.9	162	8	1
	Durham R.D.	October/November	343	26	7.6	295	20	2
8	Barnard Castle U.D.	October/November	168	17	10.1	132	8	11
	Barnard Castle R.D.	April/May ...	91	32	35.2	51	3	5
9	Bishop Auckland U.D.	January/February/October/November	972	64	6.6	831	61	16
	Shildon U.D.	June/July	107	15	14.0	87	5	—
	Spennymoor U.D.	April/May/June ...	297	22	7.5	256	10	9
10	Billingham U.D.	October	207	76	36.7	107	17	7
	Darlington R.D.	June/July	290	68	23.5	188	24	10
	Sedgefield R.D.	May/June	449	99	22.1	301	29	20
	Stockton R.D.	May	61	26	42.6	35	—	—
		Total	9,641	1,347	14.0	7,676	478	140

TABLE 33.

HANDICAPPED PUPILS—DETAILS OF CLASSIFICATION AND PLACEMENT, 1967.

(a) *Blind Pupils.*

No. of children examined by Consultant Ophthalmologists during the year	...	...	...	2
No. of children examined by School Medical Officers during the year	...	...	...	2
School Medical Officers' recommendations :—				
(a) Special schools for blind pupils	...	...	...	2
(b) Education otherwise than at school	...	...	...	—
No. in special schools at end of year	...	...	...	25
No. receiving education otherwise than at school	...	...	...	—
No. requiring places in special schools	...	...	...	1

(b) *Partially Sighted Pupils.*

No. of children examined by Consultant Ophthalmologists during year	...	...	...	4
No. of children examined by School Medical Officers during year	...	...	...	6
School Medical Officers' recommendations :—				
(a) Ordinary schools	...	...	...	—
(b) Special Schools for partially sighted	...	...	...	6
(c) Education otherwise than at school	...	...	...	—
(d) Re-examination	...	...	...	—
No. in special schools at end of year	...	...	...	20
No. receiving education otherwise than at school	...	...	...	—
No. requiring places in special schools	...	...	...	6

(c) *Deaf.*

No. of children examined during the year	...	...	...	...	...	...	8
School Medical Officers' recommendations :—							
(a) Special Schools for Deaf Children	...	...	...	...	...	...	8
(b) Home Tuition	...	...	...	...	...	...	—
No. in special schools at end of year	...	...	...	...	...	...	48
No. receiving education otherwise than at school	...	...	...	...	...	...	—
No. requiring places in special schools	...	...	...	...	...	...	—

(d) *Partially Hearing.*

No. of children examined by School Medical Officers during the year	...	...	...	...	5
School Medical Officers' recommendations :—					
(a) Ordinary schools	...	...	...	...	—
(b) Units for Partially Hearing Children	...	...	...	...	5
(c) Special Schools for Partially Hearing Pupils	...	...	...	...	—
(d) Special schools for other categories	...	...	...	...	—
No. in special schools at end of year	...	...	...	...	5
No. receiving education otherwise than at school	...	...	...	...	—
No. requiring places in special schools	...	...	...	...	—
No. in units for partially hearing	...	...	...	...	53
No. awaiting places in units	...	...	...	...	—

(e) *Physically Handicapped.*

No. of children examined during the year ...	...	...	...	...	...	...	...	...	35
No. of children re-examined during the year ...	...	...	...	...	...	...	...	...	184
School Medical Officers' recommendations :—									
(a) Ordinary schools ...	...	...	...	...	...	...	...	...	142
(b) Special schools for physically handicapped children	...	...	...	...	...	...	...	...	4
(c) Special schools for other categories	...	...	...	...	...	...	...	...	2
(d) Hospital special schools ...	...	...	...	...	...	...	...	...	—
(e) Education otherwise than at school	...	...	...	...	...	...	...	...	71
(f) Unsuitable for any school ...	...	...	...	...	...	...	...	...	—
(g) Re-examination ...	...	...	...	...	...	...	...	...	—
No. in special schools at end of year ...	...	...	...	...	...	...	...	...	59
No. receiving education otherwise than at school ...	...	...	...	...	...	...	...	...	114
No. requiring places in special schools ...	...	...	...	...	...	...	...	...	6

(f) *Delicate.*

No. of children examined during the year ...	...	...	...	...	...	...	...	...	35
No. of children re-examined during the year ...	...	...	...	...	...	...	...	...	20
School Medical Officers' recommendations :—									
(a) Ordinary schools ...	...	...	...	...	...	...	...	...	23
(b) Special schools for delicate children	...	...	...	...	...	...	...	...	24
(c) Education otherwise than at school	...	...	...	...	...	...	...	...	8
(d) Re-examination ...	...	...	...	...	...	...	...	...	—
(e) Special schools for other categories	...	...	...	...	...	...	...	...	—
No. in special schools at end of year ...	...	...	...	...	...	...	...	...	80
No. receiving education otherwise than at school ...	...	...	...	...	...	...	...	...	6
No. requiring places in special schools ...	...	...	...	...	...	...	...	...	5

(g) *Epileptic.*

No. of children examined during the year ...	...	...	...	...	...	...	...	...	5
No. of children re-examined during the year ...	...	...	...	...	...	...	...	...	2
School Medical Officers' recommendations :—									
(a) Ordinary school ...	...	...	...	...	...	...	...	...	5
(b) Special school for epileptics ...	...	...	...	...	...	...	...	...	2
(c) Special school for other categories	...	...	...	...	...	...	...	...	—
(d) Re-examination ...	...	...	...	...	...	...	...	...	—
(e) Home tuition ...	...	...	...	...	...	...	...	...	—
No. in special schools at end of year ...	...	...	...	...	...	...	...	...	6
No. receiving education otherwise than at school ...	...	...	...	...	...	...	...	...	1
No. requiring places in special schools ...	...	...	...	...	...	...	...	...	1

(h) *Educationally Sub-normal Children.*

No. of children examined during the year	198
--	-----	-----	-----	-----	-----	-----	-----	-----	-----

School Medical Officers' recommendations:—

(a) Ordinary schools	...	...	...	...	...	...	...	...	...	...	1
(b) Special education in ordinary schools	...	...	...	...	...	...	...	...	...	...	—
(c) Special schools for educationally subnormal pupils	...	...	...	...	...	...	...	...	...	...	159
(d) Special schools for other categories	...	...	...	...	...	...	...	...	...	...	—
(e) Education otherwise than at school	...	...	...	...	...	...	...	...	...	...	1
(f) Incapable of receiving education at school	...	...	...	...	...	...	...	...	...	...	61
(g) Supervision after leaving school	...	...	...	...	...	...	...	...	...	...	30
(h) Re-examination	...	...	...	...	...	...	...	...	...	...	7
No. in special schools at end of year	...	...	...	...	...	...	...	...	...	...	715
No. receiving special education in ordinary schools	...	...	...	...	...	...	...	...	...	...	3,800
No. receiving education otherwise than at school	...	...	...	...	...	...	...	...	...	...	6
No. requiring places in special schools	...	...	...	...	...	...	...	...	...	...	302
<i>(i) Maladjusted Children.</i>											
No. of children who attended Child Guidance Centres during the year	...	...	...	...	...	...	...	...	...	...	319
No. in special schools at end of year	...	...	...	...	...	...	...	...	...	...	25
No. in residential hostel at end of year	...	...	...	...	...	...	...	...	...	...	6
No. requiring places in special schools	...	...	...	...	...	...	...	...	...	...	15
<i>(j) Speech Defective Children.</i>											
No. of children receiving speech therapy in school clinics or in hospitals	...	...	...	...	...	...	...	...	...	...	665
No. in special schools at end of year	...	...	...	...	...	...	...	...	...	...	—
No. requiring places in special schools	...	...	...	...	...	...	...	...	...	...	1

TABLE 34.

(a) Analysis of Cases under Home Supervision of Health Visitors/School Nurses during the year 1967.

Code No.	Defect.	New Cases.	Re-Visits.	Satisfactorily improved.	Totals.
1.	Cleanliness ...	272	1,068	130	1,470
2.	Infestation —Head other than at head Inspections	1,422	1,093	319	2,834
	—Body ...	31	43	14	88
3.	Teeth ...	86	53	15	154
4.	Skin ...	309	312	146	767
5.	Eyes (a) Vision ...	419	210	124	753
	(b) Squint ...	152	100	24	276
	(c) Other ...	68	54	28	150
6.	Ears (a) Hearing ...	330	117	15	462
	(b) Otitis Media —R ...	20	12	1	33
	—L ...	7	5	—	12
	(c) Other ...	33	21	9	63
7.	Nose or Throat ...	310	133	43	486
8.	Speech ...	82	45	5	132
9.	Lymphatic glands ...	17	10	1	28
10.	Heart and circulation ...	42	44	3	89
11.	Lungs... ...	116	92	16	224
12.	Development—(a) Hernia ...	9	15	1	25
	(b) Other ...	38	14	1	53
13.	Orthopaedic—(a) Posture...	23	13	—	36
	(b) Flat foot ...	16	13	5	34
	(c) Other ...	127	107	25	259
14.	Nervous system—(a) Epilepsy ...	44	51	1	96
	(b) Other ...	83	72	17	172
15.	Psychological—(a) Development ...	335	115	3	453
	(b) Stability ...	219	184	19	422
16.	Clothing ...	87	128	37	252
17.	General condition ...	577	307	119	1,003
18.	Care and after care ...	349	524	101	974
Other visits regarding Immunisation and Vaccination				74	1,335
Infections ...				59	604
Totals ...				7,162	5,222
				1,355	13,739

(b) Cleanliness Survey.

Inspection.	...	...	...	No. of children inspected.	No. of children still unclean.
1st re-inspection (unclean children)	...	...	...	3,311	2,395
2nd	"	"	"	2,742	1,836
3rd	"	"	"	2,287	1,322
4th	"	"	"	1,818	958
5th	"	"	"	1,229	731
6th	"	"	"	1,009	503

The following table compares these figures with the figures of the previous eight years :—

Year.	Percentage clean.	Percentage unclean.	Percentage Verminous of unclean.
1959	91.6	8.4	4.6
1960	92.0	8.0	4.4
1961	92.0	8.0	4.2
1962	92.8	7.2	3.3
1963	92.6	7.4	3.1
1964	93.1	6.9	3.9
1965	92.9	7.1	2.7
1966	94.1	5.9	2.7
1967	94.0	6.0	2.9

In 104 schools, all the children were found to be clean.

5,713 visits were paid to the homes of the children who were found to be unclean.

TABLE 35

SCHOOL MEALS SERVICE—NEW KITCHEN DINING ROOMS, 1967

During the year 1967, new Kitchen Dining Rooms have been opened at the following schools:—

- East Boldon County Junior Mixed.
- Hetton Secondary.
- Usworth Grange County Junior Mixed.
- Usworth Grange County Infants'.
- Blaydon St. Thomas More R.C. Modern.
- Rowlands Gill County Infants'.
- Whickham Fellside County Junior Mixed.
- Fir Tree County Junior Mixed and Infants'.
- Middlestone Moor County Junior Mixed.
- Butterknowle County Junior Mixed and Infants'.
- Cockfield County Junior Mixed and Infants'.
- Gainford C.E.
- Belmont Secondary.
- Hebburn St. James R.C. Modern.

PART IV

**RURAL DISTRICT COUNCIL OF EASINGTON
EDUCATION COMMITTEE**

(Excepted District).

**ANNUAL REPORT of the
DISTRICT PRINCIPAL SCHOOL MEDICAL OFFICER**

J. W. A. RODGERS, M.B., B.Ch., D.P.H.

for the YEAR 1967.

STAFF OF THE SCHOOL HEALTH SERVICE.

DISTRICT PRINCIPAL SCHOOL MEDICAL OFFICER.

J. W. A. Rodgers, M.B., B.Ch., D.P.H.

SCHOOL MEDICAL OFFICERS.

G. L. Anderson, M.B., B.S.

M. Anderson (Mrs.), M.B., B.S.

M. M. Copland (Mrs.), M.A., M.B., Ch.B., D.P.H. (one-fifth)—resigned 30.4.67.

SCHOOL DENTAL OFFICERS.

G. Haust, L.D.S.—(resigned 30.11.67).

E. I. S. Makepeace (Mrs.), L.D.S.

CONSULTANT OPHTHALMOLOGISTS. (Part-time)

Jacob Frankenthal, L.R.C.P., L.R.C.S., D.O.

Claud J. Sharp, M.B., Ch.B., D.O.

The number of children in schools at January, 1968, was 15,481, divided as follows :—

			Number.	Children on Roll.
Nursery...	...	...	1	40
Primary	...	...	45	10,132
Secondary Modern	...	...	13	3,971
Grammar	...	...	2	1,212
Special (Day School for Educationally Sub-normal pupils)	...	...	1	126
			<hr/> 62	<hr/> 15,481

MEDICAL INSPECTIONS.

Routine medical inspection is still being carried out in three groups :—

- School Entrants
- Ten Plus Age Group
- Last year of compulsory education

Visits are also paid to Easington Junior Training Centre, Horden Day Special School and Wingate Nursery School.

The issue of Forms 10bM, the supplementary record card to be held in schools, was extended to include Secondary Modern and Grammar Schools. All schools in the Excepted District now hold these supplementary cards which have proved a great help in reducing the amount of work to be done by Head Teachers and the School Medical staff prior to arranging a School Medical Inspection.

The number of children inspected was 3,736 of which 66 were specials.

399 re-inspections were also carried out.

The percentage of children whose physical condition was found to be unsatisfactory was 0.49% compared with a figure of 1.05% in 1966.

Pupils found to require treatment at Periodic Medical Inspections (excluding Dental Diseases and Infestation with Vermin).

Age Groups Inspected. (by year of birth).	For defective vision (excluding squint).	For any of the other conditions recorded in Part II.	Total Individual Pupils.
1963 and later ...	—	3	3
1962 ...	15	63	69
1961 ...	30	144	163
1960 ...	37	117	132
1959 ...	1	13	13
1958 ...	—	1	1
1957 ...	—	1	1
1956 ...	65	92	140
1955 ...	77	100	145
1954 ...	28	29	50
1953 ...	100	96	170
1952 and earlier ...	182	155	299
Total ...	535	814	1,186

DEFECTS FOUND AT MEDICAL INSPECTION DURING THE YEAR.

Defect or Disease.	Periodic Inspections.							
	Entrants.		Leavers.		Others.		Total.	
	(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)
Skin	21	13	38	14	33	14	92	41
Eyes—								
(a) Vision	83	51	274	57	178	83	535	191
(b) Squint	58	8	23	1	34	2	115	11
(c) Other	9	2	8	2	8	—	25	4
Ears—								
(a) Hearing	59	65	10	11	18	14	87	90
(b) Otitis Media	26	13	5	6	8	14	39	33
(c) Other	6	—	2	2	4	2	12	4
Nose and Throat	92	152	57	46	39	72	188	270
Speech	11	16	1	7	2	9	14	32
Lymphatic Glands ...	—	33	2	5	1	11	3	49
Heart	6	24	1	13	4	13	11	50
Lungs	37	29	16	13	9	19	62	61
Developmental—								
(a) Hernia	1	7	—	2	2	2	3	11
(b) Other	—	9	3	1	3	5	6	15
Orthopaedic—								
(a) Posture	1	1	3	3	1	2	5	6
(b) Feet	29	32	19	22	22	25	70	79
(c) Other	11	16	22	17	8	10	41	43
Nervous System—								
(a) Epilepsy	5	5	9	1	3	2	17	8
(b) Other	10	13	3	11	7	16	20	40
Psychological—								
(a) Development	8	11	12	2	7	6	27	19
(b) Stability	3	5	4	6	8	12	15	23
Abdomen	13	19	7	6	12	9	32	34
Other	10	8	33	3	27	10	70	21

(T) Number of pupils found to need treatment.

(O) Number of pupils found to need observation.

SPECIAL INSPECTIONS.

Defect or Disease.								SPECIAL INSPECTIONS.	
								Pupils requiring Treatment.	Pupils requiring Observation.
Skin	...	...	...	...	...	...	...	6	—
Eyes—									
(a) Vision	...	...	...	...	...	...	...	11	4
(b) Squint	...	...	...	...	...	...	...	3	1
(c) Other	...	...	...	...	...	...	...	—	—
Ears—									
(a) Hearing	...	...	...	...	...	...	...	3	6
(b) Otitis Media	...	...	...	...	...	...	...	2	2
(c) Other	...	...	...	...	...	...	...	2	3
Nose and Throat	...	...	...	...	...	...	...	4	6
Speech	...	...	...	...	...	...	...	4	2
Lymphatic Glands	...	...	...	...	...	...	...	—	—
Heart	...	...	...	...	...	...	...	1	3
Lungs	...	...	...	...	...	...	...	3	2
Developmental—									
(a) Hernia	...	...	...	...	...	...	...	—	—
(b) Other	...	...	...	...	...	...	...	1	1
Orthopaedic—									
(a) Posture	...	...	...	...	...	...	...	—	1
(b) Feet	...	...	...	...	...	...	...	1	6
(c) Other	...	...	...	...	...	...	...	2	3
Nervous System—									
(a) Epilepsy	...	...	...	...	...	...	...	5	2
(b) Other	...	...	...	...	...	...	...	2	1
Psychological—									
(a) Development	...	...	...	...	...	...	...	17	—
(b) Stability	...	...	...	...	...	...	...	1	—
Abdomen	...	...	...	...	...	...	...	1	—
Other	...	...	...	...	...	...	...	1	1

PERMANENT SCHOOL CLINICS

<i>Clinic.</i>	<i>Sessions.</i>		<i>Sessions.</i>	
HORDEN. Blackhills Road.	Medical Officer ...	Tuesday (a.m.).	Educational Psychologist.	By arrangement.
Building used by School Health Service only.				
MURTON. Woods Terrace.	Medical Officer ...	Alt. Thursday (a.m.).	Educational Psychologist.	By arrangement.
	Dental Officer ...	Tues. & Wed.	Audiometrician ...	By arrangement.
Building used by Maternity and Child Welfare and School Health Service.				
PETERLEE. Fleming Place.	Medical Officer ...	Friday.	Speech Therapist	Monday, Thursday, Friday.
	Dental Officer ...	No. 1 Surgery—Daily.	Educational Psychologist. Audiometrician ...	By arrangement.
			Ophthalmologist ...	Friday (a.m.).
Building used by Maternity and Child Welfare and School Health Service.				
WHEATLEY HILL. School House, Front Street.	Medical Officer ...	Alt. Thursdays (p.m.).	Educational Psychologist.	By arrangement.
Building used by Maternity and Child Welfare and School Health Service.				
WINGATE 'Oaklea', Fir Tree.	Medical Officer ...	Alt. Monday (a.m.)	Speech Therapist	Wednesday.
	Dental Officer ...	Monday, Thursday and Friday.	Educational Psychologist.	By arrangement.
	Ophthalmologist	Wednesday (a.m.)	Audiometrician ...	By arrangement.
Building used by Maternity and Child Welfare and School Health Service.				

A large proportion of the children seen at school clinics attend by appointment, e.g. persistent absentees, requests for change of school, behaviour problems, etc. Also, the majority of college entrant and adult staff examinations are carried out during the routine clinic times.

The clinics continue to be held at fixed times to allow Head Teachers, Educational Welfare Officers, etc. to refer children without previous appointment, when they require a medical examination.

ANALYSIS OF CASES EXAMINED AT THE SCHOOL CLINICS DURING THE YEAR, 1967.

OTHER FACILITIES FOR MEDICAL TREATMENT.

Vision Testing.

Weekly sessions continue to be held at Peterlee and Wingate School Clinics. During the year 630 children were tested and spectacles were prescribed in 353 cases.

49 children who required orthoptic treatment were referred to Sunderland Eye Infirmary.

A Keystone Vision Screener was introduced during the latter part of the year.

This permits, in addition to the testing of distance vision, the testing of near and colour vision which were not previously being tested.

The machine also standardises the conditions of testing which have not always been satisfactory in many schools.

Very little vision screening of those children not being medically examined has been possible during this year but it is hoped that, with a full nursing staff and the possibility of payment of car allowances to school nurses, a fuller use of the machine will be possible next year.

Audiometric Testing.

914 appointments for audiometric tests were arranged at school clinics during the year and the results were as follows:—

<i>Referred to G.P.</i>	<i>For further Observation.</i>	<i>Appointments not kept.</i>	<i>No further action.</i>
111	443	151	209

The audiometrist continued to visit Infant schools to carry out a sweep test of hearing and 21 schools were visited during the year. 2,526 pupils were tested and, of these, 332, i.e. 13.12%, failed the test and were referred to clinics for further audiometric testing. In addition, all children referred for speech therapy or for examination as possibly educationally sub-normal are also tested for possible hearing loss.

Hearing Aids.

All children with hearing aids who attend ordinary schools are seen at intervals by the School Medical Officers together with Mr. L. Smith, County Organiser for Deaf Education, whose advice is appreciated in these matters. Reports on the pupils' educational progress are also received from their Head Teachers.

The children are then examined to ensure that each is receiving the maximum benefit from the hearing aid.

In 1967 10 children with hearing aids were attending ordinary schools in the district.

In addition pre-school children, referred by the Chief Nursing Officer as having possible hearing defects, are also seen at these clinics.

Child Guidance.

38 children were referred to Peterlee Child Guidance Clinic and sessions are held each week on a Wednesday afternoon. Of these children 8 were referred for a Psychiatric report at the request of the Juvenile Court.

5 children were recommended for placement in Schools for the Maladjusted and 3 were recommended for Approved Schools.

At the end of the year two children were awaiting admission to Schools for the Maladjusted.

The increase in demand for this service is probably partly due to the provision of local facilities and partly due to the increased referral rate from general practitioners.

While it is gratifying that the service is appreciated it is a cause for concern that, because of the length of the waiting list, many children have to wait several months for their first interview.

Speech Therapy.

After a lapse of 16 months, following the resignation of the previous Speech Therapist, Mrs. J. Pye commenced duty on 1st September, 1967.

The following table gives an analysis of the children seen.

						<i>Boys.</i>	<i>Girls.</i>	<i>Total.</i>
No. of cases on register in September, 1967	...	...	...	...	...	47	20	67
No. of new cases admitted for treatment	...	...	...	...	...	27	9	36
No. of cases discharged	...	...	...	...	...	25	13	38
No. of cases transferred	...	...	...	...	...	5	3	8
No. of cases on register in December, 1967	...	...	...	...	...	44	13	57

Other Examinations.

Physically and mentally handicapped children are ascertained either at the clinics or, where necessary, at home.

The following figures show the distribution of handicapped children in the various categories.

Blind	...	...	...	...	...	...	...	3	(1)
Partially sighted	...	...	...	...	...	...	...	8	(2)
Deaf	...	...	...	...	...	...	...	4	(—)
Partially hearing	...	...	...	...	...	...	...	6	(4)
Physically handicapped	...	...	...	...	...	...	...	17	(18)
Delicate	...	...	...	...	...	...	...	13	(11)
Epileptic	...	...	...	...	...	...	...	—	(3)
Educationally sub-normal	...	...	...	...	...	...	...	172	(43)

The figures in brackets show the number of children examined or re-examined during the year.

36 children are placed in Special Schools (apart from schools for the Educationally Sub-normal).

6 children attend partially hearing units.

109 children are attending special schools for E.S.N. children.

15 children have received Home Tuition during the year either on a permanent or short term basis.

15 children were provided with special transport for medical reasons.

At the end of the year 1 child was awaiting admission to a School for the Partially Sighted and 2 children were waiting to be admitted to Schools for the Maladjusted.

Miscellaneous medical examinations:—(figures in brackets relate to 1966).

For part-time employment while still attending school	...	...	...	...	...	9	(4)
College Entrants and Intending Teachers	...	...	...	...	...	92	(135)
Superannuation and Sick Pay Cases	...	...	...	...	...	126	(73)

Vaccination and Immunisation.

Heaf testing of school entrants and testing and B.C.G. vaccination of children in Secondary Modern Schools was again carried out by the Medical Officer of Health and his staff. In all schools, 1,803 children were tested of whom 41 were found to be positive. 826 children in the 11 year age group were vaccinated against Tuberculosis.

School Medical Officers gave 480 booster doses of Diphtheria and/or Tetanus vaccine to children who had been given a primary course in Infants' Schools in 1966.

In a further offer of immunisation to school entrants 515 booster doses and 358 primary immunisations of Diphtheria and/or Tetanus were given. 200 full courses of Poliomyelitis vaccine and 566 Poliomyelitis boosters were also given.

Dental Services.

The staffing situation deteriorated during the year. At the beginning of the year there were two full-time Dental Officers employed but, with the resignation of Mr. G. Haust in November, there is only one full-time Dental Officer for three dental clinics.

As a result of the reduction in staff, the figures for the year show a marked drop compared with those for 1966 when three full-time Dental Officers were employed.

Attendances and Treatment.

		<i>Ages</i>	<i>Ages</i>	<i>Ages</i>	
		5 to 9.	10 to 14.	15 and over.	Total.
First Visit	...	862	937	229	2,028
Subsequent visits	...	275	1,041	224	1,540
Total visits	...	1,137	1,978	453	3,568
Additional courses of treatment commenced	...	45	89	23	157
Fillings in permanent teeth	...	396	2,309	715	3,420
Fillings in deciduous teeth	...	189	35	—	224
Permanent teeth filled...	...	330	1,915	619	2,864
Deciduous teeth filled	...	158	1	—	159
Permanent teeth extracted	...	50	316	88	454
Deciduous teeth extracted	...	1,518	500	—	2,018
General anaesthetics	...	574	336	46	956
Emergencies	...	21	9	2	32
Number of Pupils X-rayed	...	...	...	...	39
Prophylaxis	...	...	...	...	168
Teeth otherwise conserved	...	...	...	...	122
Number of teeth root filled	...	...	...	...	2
Inlays	...	...	...	...	—
Crowns	...	...	...	...	—
Courses of treatment completed	...	...	...	...	1,580

Orthodontics.

Cases remaining from previous year	...	...	...	...	...	...	56
New cases commenced during year	...	...	...	...	...	...	162
Cases completed during year...	...	...	...	...	...	...	51
Cases discontinued during year	...	...	...	...	...	...	25
No. of removable appliances fitted	...	...	...	...	...	...	113
No. of fixed appliances fitted	...	...	...	...	...	...	—
Pupils referred to Hospital Consultant	...	...	...	...	...	...	47

Prosthetics.

		<i>5 to 9.</i>	<i>10 to 14.</i>	<i>15 and over.</i>	<i>Total.</i>
Pupils supplied with F.U. or F.L. (first time)	—	—	—
Pupils supplied with other dentures (first time)	16	3	19
Number of dentures supplied	18	6	24

Anaesthetics.

General Anaesthetics administered by Dental Officers	—
--	-----	-----	-----	-----	-----	---

Inspections.

- (a) First inspection at school. Number of Pupils 1,135
- (b) First inspection at clinic. Number of Pupils 605
Number of (a) + (b) found to require treatment 614
Number of (a) + (b) offered treatment 583
- (c) Pupils re-inspected at school or clinic 5,768
Number of (c) found to require treatment 2,434

Sessions.

Sessions devoted to treatment	...	...	...	...	...	...	...	...	...	804
Sessions devoted to inspection	...	...	...	...	...	...	...	...	...	59
Sessions devoted to Dental Health Education	...	...	...	...	...	...	...	...	...	—

NURSING AND HEALTH VISITOR SERVICES.

Cleanliness Inspections in Schools.

The school nurses carried out the majority of the cleanliness inspections with some help from the health visitors.

590 visits were paid to schools the details being as follows:—

	No. Inspected.	No. Unclean.	No. Verminous.
1st Inspection	12,070	46	3
1st Re-Inspection	1,933	19	—
2nd Re-Inspection	1,280	14	—
3rd Re-Inspection	1,861	16	—
4th Re-Inspection	1,667	11	—
5th Re-Inspection	1,820	17	—
6th Re-Inspection	2,169	9	—
7th Re-Inspection	1,473	6	—
8th Re-Inspection	1,128	3	—
9th Re-Inspection	570	4	—
10th Re-Inspection	222	—	—

Following these inspections, 1,903 visits were paid to the children's homes.

The number of children found to be unclean has continued to decline.

School Nurses also made 109 follow-up visits to the homes of those children who had been discharged from hospital.

PART V

**BOROUGH OF STOCKTON-ON-TEES
EDUCATION COMMITTEE**

(Excepted Division).

**ANNUAL REPORT of the
BOROUGH SCHOOL MEDICAL OFFICER**

H. J. PETERS, M.B., B.S., B.Hy., D.P.H., D.P.A.

for the YEAR 1967.

Details associated with Education in the Borough.

Number of schools	...	...	...	...	...	...	...	...	...	...	...	...	...	...	50
These include 34 Primary schools, 11 Secondary Modern Schools, one secondary technical school, two secondary grammar schools, one special open air school for delicate and physically handicapped pupils, one special school (day) for educationally subnormal children. There are also two Nursery Classes for pre-school children.															
Number of children on roll	...	...	...	...	...	...	...	...	...	...	...	...	...	...	16,978

The Staff of the School Health Service

Borough School Medical Officer—Henry J. Peters, M.B., B.S., B.Hy., D.P.H., D.P.A.

School Medical Officers

Dr. W. R. McKenzie, L.R.C.P.S.E., L.R.F.P.S.G., D.P.H., D.C.H. (left 30.6.67).

Dr. M. O'Gorman, L.R.C.P.S.I., L.M. (left 19.7.67).

Dr. R. V. Read, M.R.C.S., D.P.M. (part-time).

Dr. E. Wilmot, M.B., B.S. (part-time).

School Dental Officers.

F. R. Cadigan, L.D.S., L.R.C.P.S.E., L.R.F.P.S.G.

Mrs. E. N. Rideal, L.D.S. (part-time).

Mrs. M. Anderson, B.D.S. (part-time).

Consultant Ophthalmic Surgeons (part-time).

R. Cowley, F.R.C.S.E., D.O.

W. M. Higginbottom, L.R.C.P.S.E., L.R.F.P.S.G., D.O. (left March, 1967).

J. P. B. Hall, D.O. (commenced 22.6.67—left 28.12.67).

Psychiatrist (part-time).

J. R. Hawkings, M.B., D.P.M.

Medical Inspection

The number of children inspected was 2,690, this total being made up of 1,046 entrants, 696 leavers and 948 other inspections.

925 children referred by teachers, parents, school nurses or educational welfare officers were examined as "specials".

1,347 re-inspections of children suffering from one or more defects were carried out during the year.

Pupils found to require treatment.

The number of individual pupils found at Periodic Medical Inspection to require treatment (excluding Dental Diseases and Infestation with Vermin) is given below.

Age Groups Inspected. (by year of birth).	For Defective Vision. (excluding squint).	For any other conditions.	Total Individual pupils.
1963 and later	...	—	—
1962...	...	8	9
1961...	...	16	16
1960...	...	4	3
1959...	...	1	—
1958...	...	—	—
1957...	...	—	—
1956...	...	2	1
1955...	...	57	13
1954...	...	19	4
1953...	...	4	1
1952 and earlier	...	37	9
Total	...	148	56
			204

The following table shows the number of defects noted at periodic and special medical inspections as requiring treatment or needing to be kept under observation.

							Periodic Inspections.		Special Inspections.	
							No. of defects.		No. of defects.	
Defect or Disease.							Requiring treatment.	Requiring to be kept under observation.	Requiring treatment.	Requiring to be kept under observation.
Skin	...	...	...	...	...	...	8	19	—	—
Eyes—	a.	Vision	...	...	...	...	148	375	9	77
	b.	Squint	...	...	...	...	7	22	—	1
	c.	Other	...	...	...	...	—	5	—	—
Ears—	a.	Hearing	...	...	...	...	35	18	—	1
	b.	Otitis Media	...	...	...	...	—	7	—	—
	c.	Other	...	...	...	...	—	99	—	—
Nose and Throat	...	...	...	...	...	...	3	41	—	2
Speech	...	...	...	...	...	...	4	13	—	1
Lymphatic Glands	...	...	...	...	...	...	—	3	—	—
Heart	...	...	...	...	...	...	—	11	1	2
Lungs	...	...	...	...	...	...	—	14	—	2
Developmental—	a.	Hernia	...	...	...	...	—	3	—	—
	b.	Other	...	...	...	...	—	38	—	13
Orthopaedic—	a.	Posture	...	...	...	...	—	4	—	—
	b.	Feet	...	...	...	...	1	68	—	4
	c.	Other	...	...	...	...	—	6	—	4
Nervous System—	a.	Epilepsy	...	...	...	...	—	7	—	—
	b.	Other	...	...	...	...	—	8	—	—
Psychological—	a.	Developmental	...	...	...	...	1	1	—	1
	b.	Stability	...	...	...	...	—	2	—	—
Abdomen	...	...	...	...	...	...	—	—	—	1
Other	...	...	...	...	...	...	—	3	—	1

Physical Condition.

The whole of the 2,690 children inspected during the year were considered to be in satisfactory physical condition.

ARRANGEMENTS FOR TREATMENT

Minor Ailments.

Arrangements for treatment of minor ailments by the School Nurses are as follows. Places and times of clinics are as set out below, the children attending the clinics in or nearest to their own school:—

Address of Clinic.

106, Yarm Lane Monday, Wednesday, Friday and Saturday mornings.
Hardwick Infants School Tuesday and Thursday afternoons.

<i>Address of Clinic.</i>	<i>School Nurse in attendance on:—</i>
78, Norton Road ... ...	... Monday and Friday afternoons.
Frederick Nattrass School ...	... Monday and Wednesday mornings.
Newham Grange School ...	... Tuesday and Friday afternoons.
Tilery Road School ...	... Tuesday mornings and Thursday afternoons.
Ragworth Primary School ...	... Tuesday and Friday afternoons.
Primrose Hill Day School ...	... Tuesday and Thursday mornings.
Fairfield Secondary Modern	... Monday and Friday mornings.
Ragworth Open Air School	... Daily.

The total number of attendances at the minor ailment clinics during the year was 13,437.

The following table shows the number of defects treated during the year at the School Clinics and elsewhere :—

	<i>Defect.</i>	<i>Number of cases known to have been treated during the year at School Clinics and elsewhere.</i>
SKIN—		
Ringworm	(1) Scalp	—
	(2) Body	2
Scabies ...	... ... ... ... ...	192
Impetigo ...	... ... ... ... ...	60
Other skin diseases	... ... ... ... ...	15
EYE DISEASES :—		
External and other, but excluding errors of refraction and squint	...	133
EAR DEFECTS ... ... ... ...	...	72
MISCELLANEOUS :—		
(e.g. minor injuries, bruises, sores, chilblains, etc.)	... ... ...	4,882

VISUAL DEFECTS AND EXTERNAL EYE DISEASES

A total of 81 sessions were conducted during the year ended 31st December, 1967, at the Ophthalmic Clinic, 78, Norton Road, by the Ophthalmic Surgeons Mr. R. Cowley, Mr. W. M. Higginbottom, Mr. J. P. B. Hall and Mr. J. Maclare.

872 children attended for refraction, glasses being prescribed for 438 of those examined. The Head Teachers were notified of those who were prescribed glasses.

Operative treatment for correction of squint was recommended in 28 cases.

Seven blind children are at residential special schools, and two partially sighted children are also in special residential schools.

The school nurses continued to visit schools to give vision tests to children not medically inspected during the previous twelve months and due for examination in the near future. Children who appeared to have defective vision or squint were offered the facilities of the ophthalmic clinics.

ORTHOPTIC CLINIC

A total of 85 sessions were conducted during the year ended 31st December, 1967, at the School Clinic, 78 Norton Road by the Orthoptist, 411 children were given treatment.

NOSE AND THROAT DEFECTS EAR DISEASES AND DEFECTIVE HEARING

Hearing Aids.

8 children attending maintained schools have hearing aids. Those in attendance at schools in the town are kept under observation by the school nurse and head teachers are informed regarding children for whom hearing aids have been prescribed.

Deaf Children—Special Schools.

10 deaf children attend Middlesbrough School for the Deaf, and 1 child is at a residential school for the deaf.

Pure Tone Audiometer.

Sweep audiometer tests were carried out in Infants' Departments, almost all in the five year old age group, 1,540 children were tested, 56 were referred for retests and of these 19 were satisfactory, 37 were referred to the school medical officer.

Of the 37 examined by the school medical officer, 20 were found to have good hearing, and 7 were referred to their own doctor, for specialist treatment.

9 children were given individual tests, 5 were referred to the school medical officer, 2 were satisfactory, 3 were referred to their own doctor for specialist treatment.

Head teachers are notified of any children who are partially deaf, and who ought to be sitting near the front of the class.

ORTHOPAEDIC AND POSTURAL DEFECTS

Children needing treatment are in most cases referred, through their own doctor, to the Orthopaedic Department at one of the local hospitals.

6 children were treated at Thornaby School Clinic, where there is an out-patient clinic for children discharged from the Adele Shaw Orthopaedic Hospital.

4 physically handicapped children are at Residential Special Schools.

HOME TUITION

One child is receiving home tuition.

EPILEPSY

There are no children attending or awaiting admission to a Special School for Epileptic Children.

SPEECH CLINIC

A total of 40 sessions were conducted during the latter part of the year ending 31st December, 1967, at the Speech Clinic, Nelson Terrace by the Speech Therapist, 30 children were interviewed, 165 children were given treatment.

Cleanliness Inspections.

The total number of head inspections carried out during the year was 54,936 and the number of individual children found to be unclean was 1,347. 479 of these cases were considered serious enough to be asked to report at the clinic.

Ragworth Open Air School.

The school has accommodation for 120 children, and is also a day school for physically handicapped children.

Most of those admitted to the school are of delicate physique, physically handicapped, or suffering from such diseases as anaemia, bronchitis, asthma, rheumatism, heart disease or non-infective tuberculosis, or are convalescent after illness or operation.

During 1967, 14 delicate children, 7 physically handicapped children and 1 epileptic child were admitted to the school.

One of the school medical officers visits the school regularly and examines every child periodically. Those discharged from the school are also kept under observation and if necessary re-admitted.

Immunisation against Tuberculosis.

Vaccination against tuberculosis continued during 1967 for school children in the 13 and 14 years old age group.

705 senior children were given Mantoux tests, 73 of them having a positive reaction and 572 a negative reaction.

All of the children with negative reactions were given a B.C.G. vaccination.

872 infants were given Mantoux tests. 10 of them having a positive reaction and 777 a negative reaction.

DENTAL INSPECTION AND TREATMENT.

Attendances and Treatment.

First visit ...	...	...	...	...	...	...	...	...	...	...	...	2,229
Subsequent visits...	...	...	...	...	...	...	...	...	...	...	...	1,254
Total visits	...	...	...	...	...	...	...	...	...	...	...	3,483
Additional courses of treatment commenced	...	...	...	...	...	...	...	...	...	...	...	32
Fillings in permanent teeth	...	...	...	...	...	...	...	...	...	...	...	1,141
Fillings in deciduous teeth	...	...	...	...	...	...	...	...	...	...	...	305
Permanent teeth filled	...	...	...	...	...	...	...	...	...	...	...	1,059
Deciduous teeth filled	...	...	...	...	...	...	...	...	...	...	...	286
Permanent teeth extracted	...	...	...	...	...	...	...	...	...	...	...	751
Deciduous teeth extracted	...	...	...	...	...	...	...	...	...	...	...	2,301
General anaesthetics	...	...	...	...	...	...	...	...	...	...	...	887
General anaesthetics administered by Dental Officers	...	...	...	...	...	...	...	...	...	...	...	—
Emergencies	...	...	...	...	...	...	...	...	...	...	...	393
Prophylaxis	...	...	...	...	...	...	...	...	...	...	...	256
Teeth otherwise conserved	...	...	...	...	...	...	...	...	...	...	...	423
Courses of treatment completed	...	...	...	...	...	...	...	...	...	...	...	2,123

Orthodontics.

New cases commenced during year	...	...	...	...	...	...	...	32
Cases completed during year	...	...	...	...	...	...	...	8
Cases discontinued during year	...	...	...	...	...	...	...	3
No. of removable appliances fitted	...	...	...	...	...	...	...	9
Pupils referred to hospital Consultant	21

Prosthetics.

Pupils supplied with partial dentures	17
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Inspections.

First inspection at school. Number of pupils	13,117
Number found to require treatment	6,127
Number offered treatment	...	...	...	...	...	...	6,127
Pupils re-inspected at school clinic	...	...	...	...	...	...	1,134
Number found to require treatment	...	...	...	...	...	...	437

Sessions.

Sessions devoted to treatment	...	...	...	...	...	...	...	636
Sessions devoted to inspection	...	...	...	...	...	...	...	70

**EXTRACTS FROM THE ANNUAL REPORT ON THE WORK OF THE
CHILD GUIDANCE CLINIC.**

Staff.

Consultant Psychiatrist	...	...	...	J. R. Hawkings, M.B., D.P.M.
Educational Psychologist	...	...	...	Miss M. F. Wylie, M.A., M.Ed.
Social Worker	...	...	...	Mrs. R. C. Lyth, A.S.W.
Clerical Staff	...	...	...	Mrs. I. Hart.
Remedial Teaching Staff	...	...	...	32 Certificated Teachers are engaged in Remedial Teaching.

We have functioned here since January 1952, and from November of that year we have had a full Clinic Staff of Psychiatrist, Psychologist, and Social Worker.

The Clinic is well situated for its purpose, behind Stockton High Street and near bus stops, convenient for attendance by parents and children.

It has a large play-room and adequate accommodation and the Speech Clinic is on the ground floor of the building.

We work closely with the other social services, Probation Officers, Child Care Officers, N.S.P.C.C., Mental Health Officers, Social Welfare Officers, Youth Employment Officers, Head Teachers and Medical Practitioners etc. We try not to refuse anyone who comes for help, but endeavour to keep our waiting list as short as possible.

Junior Training Centre.

This centre continues to supply a need for the child of low intelligence. The premises are attractive and the children work happily together and make progress. Parents with misgivings about special schools are usually impressed by the surroundings, and the helpfulness of the staff, and are very satisfied to send them there.

Educationally Subnormal Pupils (I.Q. 70—)

Primrose Hill Day School has a waiting list of 20 pupils and Billingham Day School is quite full. Classes in normal schools are large, and the problem of how to teach the E.S.N. child becomes greater as time goes on. Even if it is possible to organise a special class for very slow children, there is often no available room to accommodate.

ASSESSMENT OF INTELLIGENCE QUOTIENT

TABLE 1.

Re-tests.

I.Q. (-30)	(30-39)	(40-49)	(50-59)	(60-69)	Total.
Boys.	Girls.	Boys.	Girls.	Boys.	Boys. Girls.
—	—	1	—	2	1
				1	1
				13	9
				Unable to be tested	
				17	11
				—	1
				17	12
				TOTAL 29	

Age Range.

Years.	(2 — 7)	(8-11)	(12-14)	(15+)	Total.
	Boys. Girls.				
	7 8	9 5	— —	— —	16 13
					Total 29

New cases Tested

I.Q. (-30)	(30-39)	(40-49)	(50-59)	(60-69)	Total.
Boys.	Girls.	Boys.	Girls.	Boys.	Boys. Girls.
—	—	— —	— 1	2 —	4 6
					6 7
					Total 13

Age Range.

Years.	(3 — 7)	(8 — 11)	(12-14)	(15+)	Total.
	Boys. Girls.				
	4 5	2 1	— —	— 1	6 7
					Total 13
					Complete Total 42

Dull and Backward (I.Q. 70-85).

These children seem to become more numerous each year. Staff shortage makes it impossible to organise a backward class in most schools. Two backward classes in Secondary Modern Schools have had to be abandoned. Fortunately we have been able to get Remedial Teachers for these schools, and they successfully teach small groups. Some of the dull and backward children in Primary Schools attend our remedial reading groups.

Play Therapy.

The Play Group has been disbanded for the time being, as all the children have improved. It will be resumed in due course.

ATTENDANCES AT CLINIC.

TABLE 2.

Most of those attending the Clinic regularly come for help with their lessons, and have a specific disability or are maladjusted.

	Reading and Spelling.	Reading Spelling & Arithmetic.	Arithmetic.	Other Subjects.	Discon- tinued.
Boys	22	—	1	9	32
Girls	3	4	—	1	8
Totals...	25	4	1	10	40

Report on Adjustment Classes.

Mrs. Galley has retired for health reasons, and we would like to record our appreciation of her work for the last six years. Mrs. Kelman left to do G.C.E. work in a Secondary Modern School. Mrs. Stannage left to teach an Infant class. We are glad to have any of our teachers leave to do full-time work, as we appoint only those who are unable for various reasons to work full time. We have two teachers in Secondary Modern Schools.

Our work has been further complicated by the fact that we have been asked to help Immigrant Children. We are doing this in two schools.

NUMBER OF CHILDREN IN ADJUSTMENT CLASSES

TABLE 3.

Boys.	Girls.	Total.
257	115	372

TABLE 4.

No. of Adjustment Classes.	No. of Weekly Sessions.	Length of Session.	No. of Children in each class.	Total No. of Children.	No. of Schools represented.
40	3	1 hour	6—8	372	20

AMOUNT OF RETARDATION ON ENTRY

TABLE 5.

Amount of Retardation on Entry.

Lowest. 1 year 3 months.	Highest. 6 years.	Average. 2 years 5 months.

TABLE 6
READING STANDARDS ON ENTRY.

Lowest Reading Age	Highest Reading Age,
Nil	8 years 8 months

RESULTS FOR YEAR 1967

TABLE 7.

Average Improvement after Attendance.	No. of Children.	Least Improvement.	Greatest Improvement.	Average Improvement.	No Improvement.	Returned to Class.	Left District.
4+terms	100	1 year	y. 6 m. 1	y. 2 m. 6	—	38	4
3+terms	80	4 m.	4 2	2 1	3	26	5
2+terms	44	7 m.	2 3	1 2	5	19	—
1+term	32	3 m.	2 10	10	31	8	—
Less than 1 term	16	—	—	—	—	—	—

SECONDARY MODERN SCHOOLS

We have begun, during the last weeks of 1967 to teach backward readers in two Secondary Modern Schools. Their reading ages range from 4 years to 8 years 9 months. We are not reporting on the work as yet.

TABLE 8

Boys	Girls	Total
34	3	37

Immigrant Children.

We are also helping to teach Immigrant Children in two Secondary Modern Schools. They are all Indians and Pakistani, and a few can read quite well, while others have a few words at their disposal.

TABLE 9

Boys	Girls	Total
17	4	21

Visits to Schools.

Visits to schools and to Adjustment Classes are made as often as can be arranged, by the Psychologist. Adjustment Class Teachers attend the Clinic from time to time to discuss their work. Regular meetings are held each term.

Visitors to the Clinic.

Visitors to the Clinic included doctors, nurses, students from Training Colleges, social workers, parents and a post-graduate student from Manchester University.

We would like to thank the Committee for Education of Stockton-on-Tees, for their help and support during the past sixteen years.

Social Worker.

The number of children attending the Clinic for remedial therapy has increased. Each child has shown an improvement in his general outlook after the first few attendances. Some, at the beginning, portray slight reluctance but after a few weeks their attitudes change and they become more confident and appreciative of the individual attention they have received.

Helping the child also helps the parents, and it is often found that disharmony at home shows improvement.

Parents are always encouraged to call at the Clinic whenever they want to talk over small problems which arise.

Home visits have been made to more difficult home situations, and a number of follow-up visits have been made where treatment is prolonged.

Interviews...	...	...	...	...	...	...	223
Home Visits	...	...	...	...	...	...	69
Visits to Schools and Other Agencies	...	...	...	...	...	...	9
Weekly Therapy Cases	...	...	...	...	...	...	28

Consultant Psychiatrist.

I am pleased to report a further successful and satisfactory year in which there has once again been an increase in the total number of consultations which the Clinic has provided. To some extent the balance between new consultations and therapeutic attendances has been redressed, and a slight reduction in the new case load has been countered by a considerable increase in the number of children under treatment.

Unfortunately, the pressures are as large as ever and too long a waiting list for new cases still exists.

Number of New Cases referred during year 1967 ...	...	...	...	...	...	69
Number of Cases brought forward from year 1966	...	...	...	...	...	43
Number of Cases attended one Consultation	...	...	...	...	...	42
Total Number of Cases Returned for Treatment	...	...	...	...	...	70
Total Number of Consultations (Parents and Children)	...	...	...	...	...	424
Total Number of Consultations (Children) ...	...	...	...	...	...	209

Sources of Referral to Psychiatrist.

Stockton-on-Tees School Health Service	...	...	...	...	...	11
Durham County School Health Service	...	...	...	...	...	18
Family Doctors	...	...	...	...	...	30
Consultants	...	...	...	...	...	12
Juvenile Courts and Probation Officers	...	...	...	...	...	5
Schools	...	...	...	...	...	24
Parents ...	...	...	...	...	...	12
						112

PSYCHOLOGIST

Sources of Referral

Stockton-on-Tees Borough School Health Service	...	...	...	...	...	26
Durham County School Health Service	...	...	...	...	...	7
Consultants	...	...	...	...	...	16
Medical Practitioners	...	...	...	...	...	21
Schools	...	...	...	...	...	170
Parents ...	...	...	...	...	...	36
Probation Officers	...	...	...	...	...	5

Psychological Record.

(1) *Educational Retardation.*

General backwardness	...	...	...	...	...	...	92
Backwardness in reading	...	...	...	...	...	...	8
Backwardness in spelling	...	...	...	...	...	...	1
Mentally Defective	...	...	...	...	...	...	34

(2) *Personality Maladjustment.*

General instability	...	...	...	...	...	...	27
Emotional retardation and regression	...	...	...	...	...	...	1
Psychopathic	...	...	...	...	...	...	1
Sexual	...	...	...	...	...	...	2
Anxiety, Obsessional States	...	...	...	...	...	...	1

(3) *Habit Disorders.*

Enuresis and soiling	...	...	...	...	...	...	...	15
Speech defect	...	...	...	...	...	...	...	9

(4) *Anti-Social Tendencies.*

Probation	...	...	...	...	...	...	...	2
Unmanageable behaviour	...	...	...	...	...	...	...	4
Truancy and wandering	...	...	...	...	...	...	...	9
Theft	...	...	...	...	...	...	...	10
Non-co-operation	...	...	...	...	...	...	...	8
Lying	...	...	...	...	...	...	...	6

(5) *Social Difficulties.*

Strong physical factors	8
Strong home factors	20

(6) *Special Interviews.*

I.Q. and advice	146
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Range of Intelligence.

Intelligence Quotient.

			Boys.	Girls.	Total.
130+	Very Superior Intelligence	...	3	2	5
116—129	Superior Intelligence	...	30	10	40
86—115	Average Intelligence	...	75	46	121
70—85	Dull and backward	...	45	28	73
69 and under	Mentally handicapped	...	22	19	41
	Unable to be tested	...	—	1	1
			<u>175</u>	<u>106</u>	<u>281</u>

Age Range.

Years.	(3—7)		(8—11)		(12—14)		(15+)		Total Boys.	Total Girls.
	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.	Boys.	Girls.		
	64	45	81	34	28	20	2	7	175	106
	109		115		48		9		281	

Reports.

Durham County School Health Service	...	...	...	...	...	...	...	...	47
Schools	...	...	...	...	...	...	...	...	351
Borough School Medical Officer	...	...	...	...	...	...	...	...	25
School Health Service	...	...	...	...	...	...	...	...	22
Consultants	...	...	...	...	...	...	...	...	11
Medical Practitioners	...	...	...	...	...	...	...	...	187
Probation Officers	...	...	...	...	...	...	...	...	6
Other Agencies	...	...	...	...	...	...	...	...	15
Middlesbrough Education Department and other Districts	...	...	...	...	...	...	...	...	11
Parents	...	...	...	...	...	...	...	...	6

Interviews.

Parents ...	...	...	...	...	...	...	...	...	...	...	...	513
Visitors to Clinic	...	...	...	...	...	...	...	...	...	...	...	300

Visits to

Schools	94
Homes	72

Examinations.

Intelligence tests (Individual)	281
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Treatment.

Psychological Treatment	40
Psychotherapeutic Treatment	70

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